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HISTORY

OF THE

Dundee Royal Lunatic Asylum.

BY

JAMES RORIE, M.D.

DUNDEE:

PRINTED BY JAMES P. MATHEW & CO., CAXTON HOUSE.

1912.

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N O T E.

The following history of the first fifty years of the Dundee Royal Asylum was written by the late Dr James Rorie shortly before his death, and is now published, as it may be of interest at the present time.

T. H. B. R.

G. A. R.

September 1912.

HISTORY

OF THE

Dundee Royal Lunatic Asylum.

IN the ordinary affairs of life a careful review of the bygone is often beneficial and instructive ; but it is certain to be doubly so when the subject of the retrospect is such a one as that of the treatment of the insane, concerning which so many and so varied opinions have at different times been held ; and probably at no period more than the present is such a review calculated to be productive of good results, when there seems every likelihood of the proper provision for the insane gradually assuming all the dimensions of a great social problem, and one that sooner or later must be resolutely faced.

For many years past the demand for accommodation for the insane has been great and ever increasing, and hitherto this demand has been liberally met by the erection of many new and expensive institutions ; but no sooner are they erected and fully equipped than they are filled with patients, and the cry is still for more accommodation.

Some idea of the actual increase in the number of the insane—or to speak more correctly, of the number now classed as lunatics—may be formed when it is stated that while on the 1st January 1858 the total number of insane persons in Scotland officially known to the Board of Lunacy was 5,823, on 1st January 1878 it amounted to 9,097. It is quite evident that the erection of private Asylums cannot go on *ad infinitum* in the ratio above indicated, but neither will a return to the state of neglect, wretchedness, and misery which characterised the condition of the insane towards the end of the last century ever be tolerated. Reference to public statistics further shows that the increase above referred to has to a very great extent occurred in the poorer classes of the insane, and consequently the problem which now meets us is how to provide suitable and satisfactory treatment for these at the least expense to the general community, and especially how far our present Asylums may be

capable of extension in a more economical manner than has hitherto been imagined, and with equal efficiency, as recently suggested by the experienced Chairman of the English Lunacy Board, to meet this increasing number of patients. This problem will sooner or later claim attention, and it is only natural and rational to suppose that in its solution valuable guidance will be found in the experience of the past as recorded in the histories of the public institutions for the insane. In order to form a correct view of these benefits which these establishments have already conferred on the insane, and what share the Dundee Asylum has had in the important reforms in the treatment of the insane during the last sixty years, it will be necessary in the first place to refer briefly to the state in which these individuals were about the middle and towards the close of the last century.

The Earl of Shaftesbury, then Lord Ashley, in a speech before the House of Commons in 1845, observed: "That the whole history of the world, until the era of the Reformation, does not afford an instance of a single receptacle assigned to the protection and care of these unhappy sufferers, whose malady was looked upon as hardly within the reach or hope of medical aid. If dangerous they were incarcerated in the common prisons; if of a certain rank in society they were shut up in their houses under the care of appropriate guardians. Chains, whips, darkness, and solitude were the approved and only remedies." The first Asylum provided in England appears to have been Bethlem Hospital, originally the "Monastery or Hospital of St Mary of Bethlem," and which was taken possession of by Henry VIII., and presented to the City of London, with an order that it should be converted into a house for the reception of lunatics. It is described by a writer of the time as "standing in an obscure and close place in the neighbourhood of many common sewers, and as also too small to receive and entertain a great number of distracted persons, both men and women, who stood in need of it." Another building was accordingly erected, and from the report of the physician, written about the beginning of the eighteenth century, it will be seen that, however much they may have afterwards failed in being put in practice, still certain ideas of a humane character were entertained. We are told that "in the summer-time, to air themselves, they had two large grass plats, one for the men, the other for the women; in the winter a stove for each apart, where a good fire is kept to warm them; in the hot weather a very convenient bath place to cool and wash them, which is of great service in airing their lunacy, and is easily made a hot bath for restoring their limbs when numb, or cleaning

and preserving them from scurvy, &c. Their diet is extraordinary good and proper for them, which, every week, is viewed by a committee of the governors." Other Asylums soon followed, notably St Luke's Hospital, which was erected in 1751 by voluntary subscription. Little, however, was done in the actual amelioration of the condition of the insane, and the graphic description given by the author of "What Asylums were, are, and ought to be," it is to be feared too truly depicts the condition of these establishments at this time. "Let us pass a few minutes," writes Dr Browne, "in an asylum as formerly regulated, and from the impression made by so brief a visit, let us judge of the effects which years or a lifetime spent amid such scenes was calculated to produce. The building was gloomy, placed in some low, confined situation, without windows to the front, every chink barred and grated—a perfect gaol. As you enter a creak of bolts and the clank of chains are scarcely distinguishable amid the wild chorus of shrieks and sobs which issue from every apartment. The passages are narrow, dark, damp, exhale noxious effluvia, and are provided with a door at every two or three yards. The first room you examine—measuring twelve feet long by seven wide, with a window which does not open—is perhaps for females. Ten of them, with no other covering than a rag round the waist, are chained to the wall, loathsome and hideous, but, when addressed, evidently retaining some of the intelligence and much of the feeling which in other days ennobled their nature." But a better and brighter day was soon to dawn on these miserable objects. In France attention was already beginning to be directed to their condition, and in 1792 the celebrated Pinel, whose name will ever be associated with the history of the insane, liberated fifty-three of the patients confined in the Bicetre from the chains that bound them. In the spring of the same year, in England, this reformation was begun in a different manner in the neighbourhood of York. "Of all the bad and mismanaged Asylums," and those bearing this character appear then to have been in a sad majority, "the City of York Asylum," observes Dr Connolly, "was the worst." Founded in 1772 for the decent maintenance and relief of such persons as were in low circumstances, by 1791 it had become a scene of mercenary intrigue and mismanagement, and the perfection of whatever was wrong and detestable. And yet it was out of this evil that good sprang. A female patient, one of the Society of Friends, was placed in this Institution, and shortly afterwards suspicions arose as to the treatment she had received, or rather this case on investigation confirmed suspicions which for some time had existed. The Society

of Friends, abstaining from any direct reflection on this Institution, and, although scarcely able to command sufficiently ample resources, acting with characteristic benevolence and promptness, resolved to start an Asylum of their own, and one in which there should be no secrecy. The famous Retreat at York, founded by William Tuke, was the result, an Institution which was adopted as a pattern, and for many years held as a model for imitation, by the Directors of the Dundee Asylum. Very probably, in consequence of the unostentatious habits and quiet and orderly character of this reflecting people, little was known of the experiment which was being tried at the Retreat till 1798, when Dr de la Rive visited the house, and, astonished and delighted with what he witnessed there, published some account of it in a periodical. He observes that the house does not present the idea of a prison, but rather of a large rural farm. The windows had neither bars nor grating, and the Institution is surrounded by several acres of land. As soon as patients are well enough to be employed they endeavour to make them work. A change in the treatment of the insane so thorough, and results so gratifying, could not fail to arrest public attention, and many Asylums were now erected, based on the principles which regulated the management of the Retreat.

In Scotland provision began to be made for the care of the insane about the beginning of the present century. The original Aberdeen Asylum was opened for the reception of patients in 1800, and extensively added to in 1820. In Edinburgh so far back as 1791 attention was called to the necessity for an Asylum for the insane, but the Institution was not opened till July 1813. In Glasgow a General Committee was appointed in 1804, and the Asylum was opened on 12th September 1814. In Montrose a scheme for erecting a Lunatic Asylum was set on foot as early as 1779, and an institution of this description was opened in 1782. The proposal to establish an Asylum for the care and treatment of the insane in Dundee originated with the Governors of the Infirmary, who had long recognised the necessity for such an institution; but it was not till 1805 that the Committee was appointed to procure subscriptions for carrying out their design. In a report published in 1815 these proceedings are thus referred to:—"Dundee, which as to population ranks the third in Scotland, had no public institution for furnishing medical and surgical aid to the poor till 1782, when Robert Small, D.D., and Mr Robert Stewart, surgeon, commenced a subscription for the establishment of a Dispensary. Their laudable zeal was liberally supported by an annual contribution, and by the gratuitous assistance of the medical

gentlemen in town, who, having divided the town into districts, not only prescribed to such as called upon them, but visited the poor at their own houses. The good effect of this infant Dispensary was very sensibly felt by the poor, but it was limited in its means, and the want of a house for the reception of patients greatly diminished its usefulness. Under these circumstances the contributors resolved to make an effort to procure the means for building an Infirmary. Contributions for this purpose having been obtained both in town and country, a Committee was appointed to solicit further aid, to purchase ground, and to procure a plan of the building. In 1794 ground was purchased at [what at that time was] the east end of the town, north of King street, and then an airy situation. A plan was furnished by Mr John Paterson, architect in Edinburgh, who also contracted for the work. The foundation stone was laid 17th June 1794, and the house opened for patients in spring 1798. It was in attending to the affairs of the Infirmary that the Managing Committee had to witness several cases of mental derangement, and to regret that the Institution did not enable them to afford any relief to these unhappy persons. The subject was often pressed on their attention and that of the contributors at their quarterly meetings. It had also excited much interest in other parts of the country, and they hoped that it only required to be stated to the public to ensure its sanction and support for establishing here an Asylum for the comfort, relief, and cure of persons suffering under the most afflicting of all calamities. In this they were happily gratified by general approbation, and by the liberal support of public bodies and inhabitants both in town and country."

It will be seen, therefore, that the Asylum originated in every sense of the term as a great public charity and as a branch of the Dundee Infirmary. A Committee of Contributors was soon appointed to carry the design into effect, and in this they were early encouraged from an unexpected quarter. Isaac Hawkins, Esq., of Burton-upon-Trent, having left a great part of his personal estate for charitable purposes, George Dempster, Esq. of Dunnichen, applied to Mr Hawkins' executors—Isaac Hawkins Brown, Esq., M.P. for Bridgnorth, and the Rev. Thomas Gisbornes—who appropriated £500 3 per cent. consolidated Bank annuities for the use of the Asylum. The first duty devolving on the Committee of Contributors was to select an eligible site for the building. For this purpose a piece of ground was obtained from James Guthrie, Esq. of Craigie, measuring 3 acres 38 falls and 12 ells. This piece of ground, now surrounded by buildings, is described as then situate about half a mile north of the town, above which it is considerably

elevated, sloping to the south, where the soil is dry and the air free and unconfined. For a plan of buildings they were led to apply to Mr William Stark, architect, Edinburgh, a gentleman who had devoted much of his time to works of this kind. The plan furnished by Mr Stark is described as having had the unqualified approbation of the best judges, and possessing in a high degree the following advantages :—It admits of a very minute classification of patients according to their different ranks, characters, and degrees of disease ; it secures to every room the freest ventilation, and provides for the diffusion of heat through the building ; under one general management it separates the different classes of inhabitants from one another as completely as if they lived at the greatest distance ; and it enables that system to be executed which every Asylum ought especially to keep in view—that of great gentleness and great liberty and comfort, combined with the fullest security.

As happens in almost every undertaking of the kind, pecuniary difficulties are not long in presenting themselves. “After having paid for the ground, constructing a well, and other charges, the Committee in March 1812 found that the funds at their disposal amounted to no more than £405 13s, and when they had before them the estimates of the different tradesmen” it may be easily supposed that “it was not without anxiety that they looked forward to the accomplishment of a work of such magnitude. They, however, pledged their own security to the contractors, trusting to the public support,” and in this they were not disappointed, as that pledge was soon liberally and honourably redeemed, thus giving evidence of the liberality of conduct and of a confidence in the undertaking which tells its own tale and needs no comment.

At first the walls surrounding the Asylum enclosed only about two acres of ground, and the plan of the Asylum consisted of a central building and four wings. At each end of the building was a room for the superintendents, having on each side a day room for the patients, which communicated with the adjoining wings and with airing grounds, of which there were two at each end of the building. Behind the building were placed the kitchen, baths, washing-house, etc. The rest of the ground was laid out in walks and shrubbery, and devoted partly for garden and also for the recreation of the patients. The western half of the central building and the west wing were appropriated for male patients, and the eastern half and wings for females. These again were subdivided according to the classes of patients and rates of board paid, each having its separate day room and airing ground. When the wretched state in which the insane were but a few years previous to

this date is kept in view, it will be seen how vast an improvement had already been effected in their treatment, and it is worthy of remark that this had been brought about solely by the personal exertions and philanthropy of private individuals. The Dundee Asylum, from the position of its site and the perfection of its arrangements, at once took a high position among similar Institutions, and soon acquired a widespread reputation : and some idea of interest which was had in the undertaking may be formed from the following account of the imposing ceremony which took place at the laying of the foundation stone, recollections of which still linger in the memories of some of our older inhabitants.

The foundation stone of the Asylum was laid on Thursday, the 3rd September 1812, by the Right Hon. Viscount Duncan, Grand Master-Elect for Scotland, attended by the Right Hon. Lord Kinnaird, and the Hon. William Maule, M.P., acting Grand Master for the County. The procession assembled in the Ward at eleven o'clock, and at one o'clock proceeded in the following order to the site of the building :

- A Band of Music.
- Town Officers, with halberts.
- The Provost and the Sheriff of the County.
- The Magistrates.
- The Town Clerks.
- The Town Council, two and two.
- The Beadles of the Churches.
- The Ministers of the Town in their gowns and bands.
- The Officer of the Nine Trades.
- The Convener of the Nine Trades.
- The Deacon and Members of each of the Nine Trades,
in their order of precedence : each Trade preceded by its Officer.
- The Convener and Deacons and Members of the Three United Trades,
in their order of precedence : each preceded by its Officer.
- The Visitor and Fraternity of Maltmen : preceded by its Officer.
- The Boxmaster and Fraternity of Seamen : preceded by its Officer.
- The Weaver Society.
- The Flaxdresser Society.
- Ancient Gardener Society.
- Adam's Gardener Society.
- Physicians and Surgeons.
- The Committee and Contributors to the Institution, two and two.
- A Band of Music.
- Thistle Operative Lodge of Freemasons.
- St David's Lodge of Freemasons.
- The Ancient Lodge of Freemasons.
- Operative Lodge of Freemasons.
- Lord Viscount Duncan, supported by Lord Kinnaird and the
Honourable William Maule.

When the procession arrived at the ground, it ranged itself into a square within the enclosure, and having opened, Lord Duncan and his attendants walked through the avenue thus formed to the centre of the enclosure, where the foundation stone was to be laid—the bands playing the while, “God Save the King.” An eloquent prayer was then delivered by the Rev. Dr MacLachlan, at the conclusion of which the stone by means of a crane was deposited in its bed, and Lord Duncan, after placing in a cavity a glass bottle containing the coins of the reign, an almanac, two Dundee newspapers, and a roll of parchment bearing an appropriate inscription, laid the foundation stone of the Asylum. After other ceremonies of a Masonic nature were gone through, the Rev. Dr Nicoll, as Chairman of the Governors, next addressed Lord Duncan, Lord Kinnaird, and Mr Maule in a most animated speech, during which he paid a merited tribute to the memory of Lord Duncan’s father. As indicating the general interest taken in the proceeding, the report above quoted adds:—The day was most favourable, and the numbers assembled to join and witness the procession were never equalled in this town on any similar occasion. In the evening, Lord Duncan, Lord Kinnaird, Mr Maule, Major Moncrieff, Mr Oswald, etc., dined with the Committee, Magistrates, and many of the contributors. The Trades also had a dinner. The following is a copy of the inscription on the parchment roll above referred to, which, from the names inscribed on it, will no doubt be perused with interest by many in this town.

(On the one side.)

To Restore the Use of Reason,
To Alleviate Suffering and Lessen Peril where Reason cannot
be Restored,
The

Dundee Lunatic Asylum
Was Erected by Public Contribution.

By the favour of Almighty God
The Right Honourable Lord Viscount Duncan,
Grand Master-Elect for Scotland,
Attended by
The Honourable William Maule, Provincial Grand Master
for the County of Forfar,
Laid the Foundation Stone
On the Third Day of September MDCCCXII,
Era of Masonry 5812,
And Fifty-Second Year of the Reign of our Most Gracious
Sovereign,
George the Third.

In presence of the Committee : consisting of
 David Blair, Esq., Robert Jobson, Esq.,
 Ebenezer Anderson, Esq., John Alison, Esq.,
 David Jobson, Junior, Esq., James Gray, Esq.,
 Alexander Pitcairn, Esq., Francis Nicoll, D.D.
 And of the Magistrates, the Ministers, the Incorporation, and the
 other Managers and Contributors to this Asylum.
 William Stark, Esq., Architect.
 Which undertaking may the Supreme God bless and prosper.

(On the other side.)

Magistrates of the Town of Dundee.

MDCCCXII.

John Guild, Esq., ...	...	...	...	<i>Provost.</i>
David Brown, Esq.,	}			
Patrick Anderson, Esq.,				
Colin Symers, Esq.,		...	...	<i>Bailies.</i>
One vacant by the death of Partick Smith, Esq.,				
Patrick Whitson, Esq.,	...	...	...	<i>Dean of Guild.</i>
David Hazel, Esq.,	...	...	...	<i>Treasurer.</i>
James Lowson, Esq.,	...	.	...	<i>Convener of the Trades.</i>

Into the great reformation in the treatment of the insane which occurred subsequent to this date—such as the introduction of employment of weaving and other forms of mechanical labour, the establishment of religious services, means of education and amusement, etc., and the abolition of restraint, in all of which the Dundee Asylum took so prominent a part—we cannot at present enter, but must defer their further notice to some future occasion.

The extent to which the Asylum was originally a charity is shown by the fact that as early as 5th March 1812, the amount of subscriptions received and lodged in the Bank was £1,184 17s.

In the year 1819, by Royal Charter dated the 8th and sealed the 28th day of May, all contributors and donors of £10 10s in one sum or of an annual subscription of 21s or of £5 5s in one sum and an annual subscription of 10s 6d to the funds of the Infirmary and contributors of £10 10s in one sum or £2 2s yearly to the funds of the Asylum were incorporated into one body by the name of “The Dundee Infirmary and Asylum,” and by this Charter it was provided that this Corporation should consist of two separate establishments with distinct and separate estates and funds, the one to be called “The Dundee Infirmary Establishment,” and the other “The Dundee Lunatic Asylum Establishment,” and in order to secure a thoroughly public direction in the affairs of the Asylum the following Directorate was ordered to be chosen:—

I. Extraordinary Directors, viz:—

1. The Lord Lieutenant of the County of Forfar.

2. The Representative in Parliament for the County of Forfar.
 3. The Sheriff Depute of the County of Forfar.
 4. The Representative in Parliament of the Burgh of Dundee.
 5. The Moderator of the Synod of Angus and Mearns.
 6. Five Life Directors appointed by the Contributors.
- II. Ordinary Directors, viz :—
1. The Provost, oldest Bailie, and Dean of Guild for the time-being.
 2. Three persons chosen by the Nine Incorporated Trades.
 3. Four persons chosen by the Guildry.
 4. One by the Chairman of contributing Lodges or Societies in Dundee.
 5. Two by the Kirk Session.
 6. Two by the Presbytery of Dundee.
 7. Four by the Freeholders and Commissioners of Supply.
 8. Eight by the Governors of the Infirmary of Dundee.

It would have been difficult to have selected a more judicious Directorate, and the harmony which has prevailed for so many years in the management of this great charity is the best proof of the sagacity then displayed.

This Charter continued in operation until the altered and extended circumstances of both Infirmary and Asylum rendered it expedient for each Institution to have a separate one. The new Charter of the Asylum—granted 17th and sealed 27th May 1875—continued the same Directorate, and with a very few exceptions the same powers as were embodied in the former Charter.

The first Chairman of the Asylum was David Blair, Esq., of Cookston.

The earlier Reports of the Dundee Asylum contain matter of great interest, giving as they do the views then entertained as to the nature and treatment of the insane. At the date of the erection and opening of the Asylum, the idea that the insane belonged only to the dangerous class of society, and required nothing beyond safe custody, had already given way to more humane, liberal, and enlightened views. The great benefit of early treatment and of kindness was being recognised, the fact that insanity was after all a disease had now been admitted, and so in the very first Annual Reports published considerable space is taken up with the medical treatment pursued. The period described in the first Report extends from 1st April 1820, when the Institution was opened for admission of patients, to 31st May 1821. The number of

patients admitted during this period was 23 males and 27 females—50 in all—and the principles on which their treatment was conducted are thus referred to :—

“The means of cure, though resting mainly on the moral regime and general management of the House, have a constant reference to the medical art, as the functions of mind are immediately dependent on bodily organisation, and insanity is thus often found intimately connected with, or the obvious result of, disease in the general system, which at all times sympathises deeply with mental distress. Hence in the experience of this Institution the application of medicine had been of decided and effectual service in many instances.

“Besides some mechanical apparatus strongly recommended by the experience of other Institutions, and now in readiness when circumstances call for its use, the erection of hot and cold baths is indispensably necessary for the comfort and recovery of the insane in certain forms of the malady, and which are capable of very extensive and salutary application.

That the value of occupation and recreation had already been realised as important agents in the amelioration and treatment of the patients is seen from the following remarks :—“The enclosure of the adjacent ground belonging to the Asylum is in many points of view of much consequence, both in respect to economy and to the enlarged field of amusement which this would open up to many of the patients. Manual labour and innocent amusements form an agreeable recreation to those in a certain state of convalescence, and by abstracting the mind from the subject of erroneous thought, and improving the general health, have been always found a powerful means of remedy, while they add so much to the comfort and enjoyment necessarily abridged by this sad calamity.” Many of the patients fill up a tedious hour by reading on various subjects (books, newspapers, etc.), and it is pleasant to read that thus early in the history of the Institution physical restraint, which was in common use at the time, was regarded with a feeling almost amounting to aversion. “In cases of violence,” it is stated, “restraint is necessarily had recourse to, but this is done as seldom and with as little severity as possible ; and when the paroxysm that has rendered restraint necessary subsides it is immediately withdrawn. Indeed, restraint even in cases of violent paroxysm is often superseded by those personal attentions on the part of the keepers, who with a quick discernment, the fruit of experience, can often anticipate outrage, and counteract its force before it is thoroughly evolved. Certain

discipline, indeed, without harshness, is in general sufficient to overawe the more violent, and habit confirms the fortunate association which produces tranquillity; and this, aided by the powers of nature and other subsidiary means, often leads to a happy issue."

As was only to be expected, the institution of a special establishment for the treatment of the insane would naturally attract considerable attention, but unnecessary exposure of the patients' infirmities was promptly discouraged, for we find that: "The Directors press on their constituents the high importance of adhering strictly and pertinaciously to that excellent rule, which forbids impertinent curiosity and limits the inspection of the patients to the visitors and the Physician, who have alone this sacred duty to perform." No regular Physician would appear to have been appointed during the first year's existence of the Asylum, the only officers being Mr Charles Young Roger, Treasurer; Mr Thomas Drummond, Secretary; Mr William Radley, Superintendent; and Mrs Radley, Matron; but, in the list of officials published in the second Report, the name of Alexander Ramsay, M.D., appears as Visiting Physician, and Dr Ramsay continued to act in this capacity till his death in 1835.

The enlightened views advocated as to the treatment of the patients, and recorded in the first Report, were continued, and are thus referred to in the second Report for the year ending 31st May 1822 by the Directors:—

"One of the first steps towards the successful treatment of the insane was the establishment of Lunatic Asylums. In few private families can a course of judicious treatment ever be successfully followed out. Many conveniences must always be wanting in them which are to be found in every well regulated public establishment, while change of scene and of those associations by which alienation of mind is often aggravated and confirmed, besides other things of very powerful influence on the health, comfort, and recovery of insane persons—all unite in recommending the removal of persons labouring under insanity from home, and a temporary separation of them from their relations. The time is happily gone by when it was thought enough to prevent the patient from doing violence to himself or to those about him. To security are added comfort and the means of cure; no longer condemned to drag out a miserable existence in filth and wretchedness, in solitude and nakedness, perhaps in darkness and in chains. The spirit of the times respects the feelings of the unhappy sufferer; fans the latent spark of reason in his mind; soothes him under his strongest



NORTH ENTRANCE AND COURT.



excitements, and, by means the most gentle and humane, either restores him to himself and to the world, or at least renders his situation infinitely more comfortable than was formerly attempted or even contemplated. If these observations will apply to the treatment of the more affluent, they are still more applicable to that of the insane poor. The rich contrive to surround their suffering relatives with many sources of comfort, and to provide for them the means of recovery in private, although seldom, if ever, with that success which attends an Institution conducted by those who are familiar with the application of the proper means of soothing and restoring the insane. But the poor have no resources, their friends have not the means of providing for them what is necessary for their security, and still less for their recovery. An attempt to do so, indeed, continued for any length of time, is often fatal to the very object they have in view, as it confirms the false impressions indulged in by the patient, and renders recovery more precarious. Nor will Asylums conducted for private advantage, however skilfully and successfully managed, meet the exigencies of the poor. To the poor an Institution conducted on public principles, and with a view eminently to the accommodation of a class of persons whose circumstances render the lowest terms of board indispensably necessary, is the only refuge. Such an Institution is the Dundee Lunatic Asylum."

Views so sound and so well expressed may well commend themselves to practical philanthropists of the present day. The case now is no doubt to a certain extent different. The lowest class of the insane—the rate paid poor—need want for nothing. Suitable Institutions, well provided with everything necessary for their treatment and welfare, must be erected for them by direct assessment, as in the case of the District Lunatic Asylum; but a very large number of patients, bordering on pauperism, exists to whom the above is, and no doubt will be, always applicable.

At this period in the history of the Asylum the importance of early treatment was fully recognised, as well as the importance of freedom and strict moral training. In the Medical Report for this year we find it stated "that it is almost needless to report what is so obvious, and so well confirmed by universal experience, that the number of cures, other circumstances being equal, holds a direct ratio to the recency of the attack, hence early application is of infinite value. The moral regimen, founded on principles of humanity, and guided by experience, meets with all that attention which its importance demands. Severity and corporal punishment are here unknown, and it is surely very satisfactory to announce

that not a single patient has yet been confined during the day, to restrain fury or prevent mischief, above an hour or two, and that very rarely during the last twelve months. Several who have known only chains and solitary confinement for many years have experienced in this house immunity from all restraints, and have shown themselves worthy of this better treatment by their quiet and orderly demeanour, thus proving the susceptibility of the maniac to marks of confidence, attention, and kindness."

A curious reference occurs in this Report to a means of treatment which had then been in use and which now would be regarded as utterly indefensible. "The whirling chair has only once been employed, but without decided benefit. Further trials," it is added, "warranted by the experience of other institutions are yet awaiting here to determine its value." This is the only notice to be found in the Reports of this curious instrument or rather machine which seems, even then, to have belonged to a bygone age. Indeed we rarely find it referred to in the literature of the time, far less subsequently. Sir Alexander Morrison, however, speaks of it apparently with commendation. In his work on Insanity he says: "The excitement of certain emotions or passions is sometimes of use in mental treatment, in particular the agreeable emotions of hope and of religious consolation, and the disagreeable ones of shame and fear. To excite the latter in a moderate degree certain mechanical means have been employed, as the rotatory machine and the douche of cold water."

The whirling chairs belong therefore to the same category as the bath of surprise, where the patient was made to walk along a passage till he came to a part of the floor which was movable and gave way under his weight. Underneath this was a tank of cold water into which the patient fell. Strange as it may seem, sudden improvement at times resulted from the shock, but in many cases the opposite must have been the result.

The whirling chairs were of various forms of construction. In the Dundee Asylum, by mechanical means, a portion of the floor or of a low platform on which the chair was placed with the patient sitting in it was made to revolve with greater or less speed. In other Asylums, as in the case quoted by Sir A. Morrison, an ordinary chair was suspended from a framework and by pulleys made to revolve in the same manner.

In the third Report for the year ending 31st May 1823, mildness is insisted upon as "the principle which regulates the treatment of the patients in every station of life" and the importance of attention "to neatness of apparel, to proper regimen in diet, and to regularity

and propriety in all [the patient's] habits." "Moral restraint has been found to have a power beyond credibility prior to experience, and this great and powerful engine will for the future be in constant use in the management of the patients." The dangers of delay are again referred to as "increasing the disorder of the faculties and confirming every morbid association," while bad treatment or neglect is pointed out as "sapping the foundation of health and always lessening the chances of success."

On 31st May 1824, the number of patients resident was seventy-four and their general condition is thus described: "None are confined to their apartments, in fine weather they are generally found in the airing grounds, pursuing those avocations and amusements to which they directed by their former habits or taste. Some are engaged in reading; some in playing on musical instruments; some in drawing; some are employed in manual labour in the garden; here a party is seen at cards; there a couple are intent at backgammon; some females are sewing; some knitting or spinning; some voluntarily engage in the work of the house, while it must be added with regret that there are others from whom the eye of the keeper must not wander."

Nor were the effects of direct medicinal treatment overlooked, for cases are mentioned "of the successful application of medicine in dispelling some of the most unhappy illusions of the senses and perversion of the natural feelings." One case is especially referred to, that of a patient who had the idea of a consuming fire in his vitals and who was rendered miserable beyond conception by the notion which perpetually haunted his imagination, and had rendered him obstinate in refusing food or drink, as, in his estimation these only added fuel to the flame within him. After the use of appropriate medicine in correcting great and manifest disorder of the stomach and bowels the idea gave way and the patient was restored to his previous mental health.

The attention of the Directors was now engaged in the provision of a suitable washing, laundry, and drying house, which was erected behind the building adjoining the kitchen; and also to the addition of two wings to the building for noisy patients, involving an additional outlay of £3000.

In the Report for year ending 31st May 1825 attention is strongly directed to the importance of early treatment, and to the danger of delay, and it is especially pointed out "that it is neither by an exclusive moral treatment nor by the use of remedies alone drawn from the medical art that the cure of lunacy is to be effected. It is best accomplished by a happy combination of both,

and the discriminate application of their principles to the specialties of every individual case."

The importance of seeing that the requirements of the statute were fully attended to is shown by the fact mentioned in the Report for year ending 31st May 1826—namely, that by the Bye-laws "it is provided that the Superintendent shall receive no one within the walls of the Asylum even *pro tempore* until all the requisite certificates shall have been filled up." In the case of persons coming from a distance, who, not having previously informed themselves of the conditions of admission, had brought their patients to the doors of the Asylum, and had requested permission to leave them under the care of the Superintendent while they themselves had gone in search of a Director to fill up the necessary order—this, it is pointed out, can in no future instance be complied with.

The arrangements for admission of patients at this period seem to have been efficient, and altogether free from the objectionable element of the Sheriff's order afterwards introduced. When a patient was to be admitted, the application for admission and a certificate of insanity granted by a regular medical practitioner had to be delivered to the Superintendent—the certificate being in this form :—

"I,....., physician (or surgeon) in....., have carefully examined....., in the parish of....., and I do hereby certify that, to the best of my knowledge and belief, is in a state of lunacy, and a proper subject for admission into a Lunatic Asylum.

"This I certify on soul and conscience."

This had to be accompanied by a letter "from two respectable persons acquainted with the situation of the patient," addressed to the Directors of the Asylum, as follows .—

"Gentlemen,—Having good cause to believe, from our own observation, and from the medical certificate herewith sent subscribed by....., physician (or surgeon) in the parish ofand county of....., that..... has been for.....past disordered in mind, we beg thatbe admitted a patient in the Dundee Lunatic Asylum according to the Regulations of that Institution"; and along with this a bond of obligation to pay board, etc.

These were laid before the Committee, who, if satisfied with them, and if there was room in the house, ordered the patient's admission. In urgent cases one of the Directors with the physician could admit the case, but this had to be reported at the first

meeting of Committee ; but in all cases “ a medical certificate had to be produced.”

It will be seen from this that the patients were received very much as patients sent to a hospital, and the arrangements were free from the prison-like consignment which inevitably accompanies a legal order for admission and detention.

An interesting remark occurs in the seventh Report (for year ending 31st May 1827), namely :—“ There seems to be no reason to doubt that the number of lunatics placed in Asylums for the time to come will greatly exceed the number of those who have been confined during the time that is past.” Thus early did the question which of recent years has engaged so much attention show itself. “ Whether or not we believe,” the Report goes on to say, “ a fact which seems at least to be very probable, that lunacy is now more prevalent than at any former period, we must acknowledge that the returns made to the inquiries of Government some years ago contained an amount that excited surprise.” The Directors, however, flattered themselves “ that their establishment is planned so as to answer the demands of the immediate neighbourhood, however the circumstances of society may change.”

Continued efforts were made to occupy the patients, and the Medical Report states, “ We just begin to recognise the benefit of employing some of the male patients out of doors, now that the grounds are enclosed and safe from the risk of escape or exposure. Exercise and labour in the open air, independently of their physical effects in giving strength and life to the whole animal frame, have a powerful influence over the disordered mind. We have reason to believe that the fear of mischief from the liberty of working out of doors has been greatly over-rated, subject, however, as it must be, to that discretion and watchfulness which no consideration ought to supersede.”

Thus early we find foreshadowed what afterwards raised the Dundee Asylum to its high position among similar Institutions—the occupation of the patients as *a means of cure*. “ Next in importance,” says the Report, “ to this object is certainly to be ranked the employment of the active powers in such of the mechanical arts as are familiar to many of our male patients. The erection of workshops and a stock of implements and other apparatus will no doubt be necessary to effect this noble purpose.”

About this time the management of Asylums for the Insane was a subject much agitated in both Houses of Parliament, so we find the Directors declaring “ that it is next to an impossibility for any abuse to creep into the Dundee Royal Asylum without

immediate detection,' and they are confident that no legislative enactments can in any material matter affect their Institution, and express the belief that the provisions of it have been completely anticipated by the regulations and the invariable practice of the Dundee Asylum. It is also recorded, and this is specially worthy of remark, "that the consolation and comfort of the incurable is a point sedulously attended to."

We have given the foregoing extracts from the earlier Reports at some length because considerable misapprehension has existed as to the treatment pursued during the earlier years of the Asylum, many being of opinion that the humane views were of comparatively recent development, whereas it will be seen that from the very beginning of the Institution, strict humanity, free occupation, and careful medical treatment were all rightly insisted upon.

During the year ending 31st May 1829, arrangements were completed for adding a portion of ground to the other property already possessed by the Directors. This ground was part of a valuable nursery, and was held under lease, but in view of the probable extension of the buildings, it was indispensable that it should belong to the Asylum. This was secured, "and the whole property," says the Report, "is now surrounded by a substantial wall, ten feet high, which gives an air of privacy and security to the whole establishment, affords a wider field of exercise to the convalescent patients, and renders the escape of any difficult, if not impracticable."

A fire engine was also ordered during this year, the weekly committee pledging themselves to see it exercised at least once a month. In the course of this year also "the new Act of Parliament relative to Lunatic Asylums came into operation." The Directors had expressed "their apprehension that the Act would throw difficulties in their way, and contain provisions which, though necessary to correct abuses in large establishments in or adjoining to the Metropolis, might yet clog the operations of an Institution in the country only rising into existence and struggling with difficulties into which little or no abuse can have entered, and which from the nature of its constitution affords effectual means by which such abuses may be speedily detected and exposed." They found, however, that their fears were in a great measure groundless, "as many of the provisions of this Act had been already embodied in the regulations of this Institution, and were even more express and particular than the enactments of the statute itself." It may be mentioned that this Act enacted that the order of the Sheriff or of his substitutes should be obtained, as well as a medical

certificate, before a patient could be admitted into an Asylum, and further, that "whenever there are 100 patients or upwards in any Asylum, that there shall be a medical gentleman resident in the house" (that the physician shall be resident). The manner in which the Directors endeavoured to meet the latter difficulty it must be confessed was not in keeping with their previous enlightened views, for we find "it was finally resolved that as the House cannot in its present state afford comfortable accommodation for more than 100 patients, this number should not be exceeded in the meantime, the Directors being fully satisfied that the appointment of a resident medical gentleman, while it brought additional expense to the establishment, would not contribute to the real welfare and comfort of the patients." The redeeming feature, however, appears as the first record of the boarding out of patients harmless and no longer benefiting by treatment, for, it is added, "a very few patients, who had been long in the house, who had made little progress towards convalescence, and who could be accommodated with little difficulty by their friends in private, were removed; and since the passing of the Act the number has been limited to 100."

As will appear later on, this difficulty was overcome in a better and happier manner.

The following extract from the Medical Report of this year is instructive, not only in showing clearly the views then entertained by the medical profession on the nature of insanity, but also in relation to the recent legislation:—"The important discoveries of modern times have given rise to interesting discussions relative to the treatment of insanity; and the minute examination of the structure of functions of the brain and nervous system, both in a state of health and disease, cannot fail to throw some light upon the connection of mind with matter, and though nature may have thrown an impenetrable veil over the ultimate essence of this connection, as infinitely removed from the limited comprehension of the human understanding, and far too minute for man's feeble powers of vision; yet morbid anatomy has added much to the value of these discoveries, and given a nearer approximation to the truth, with a corrective to those erroneous notions and false views which have led to the most unfortunate and absurd treatment of lunacy. Anatomical investigation after death clearly demonstrates the vanity of attempting to pluck the rooted sorrow from the heart by means directed to the regulation of the mind alone, and the cruelty of corporal punishment in any shape, to correct the aberrations of reason.

"The moral affections of our nature have, indeed, much to do

with insanity and its treatment; but these hold very often a subordinate rank to other means of far greater power.

"The Legislature has added the weight of its authority of late, to the force of [the Asylum] regulations, as to the admission and custody of lunatics, the Warrant of the Sheriff of the County being in every case required with a medical certificate of lunacy before any patient can be received into an Asylum, public or private. His official inspections at pleasure, the frequent survey of your own House Visitors, some of whom are always medical men, and hence, it may be presumed, competent judges, render it morally impossible to introduce any person into this House as a lunatic who is not so, or to detain any one for an undue length of time who may have recovered his senses."

The Asylum may be said now to enter on a new phase of management. Up to this date the supervision of the Asylum was confided to a lay Superintendent (Mr Radley), who, with his wife as matron, had entire control of the internal arrangements. But although non-medical, he had to discharge much work of a medical character.

From what is contained in the Rules printed in 1821, it is evident that it was intended to have an Apothecary as well as a lay Superintendent, and the duties of the former were to include keeping of the Medical Case Books, "marking distinctly every circumstance communicated by the friends, or learned by the most accurate investigation, and repeated conversations with the patient." The case so taken was to be read to the Physician before he examined the patient. Again, he was to mark the reports and prescriptions dictated by the Physician, to carefully prepare and safely administer every medicine ordered, but, except in cases of sudden emergency, he was to prescribe nothing himself. He had to keep a record of all medicines ordered and instruments purchased. But the Apothecary was never appointed, and his rules are prefaced by the remark that "until other provision shall be found necessary for that department, the duties of Apothecary will fall to be discharged by the Superintendent." In the Rules printed in 1825 the Apothecary's are left out, but the duties to be discharged by him engrossed in those of the Superintendent.

The whole responsibility for and treatment of the patients rested with the (visiting) Physician. This official had to visit the Asylum at least three times a week, and examine each patient at least once a week. In cases of fever or acute diseases he had to visit daily. On the admission of a patient the case recorded by the Superintendent was read and he had then carefully to examine the

patient and prescribe the management, regimen and medicines judged most proper. Articles of food and drink left with the Superintendent for patients by friends were only to be given after permission granted by the Physician.

An indication of the general principles adopted in the management and treatment of the patients is afforded by the bye-law which appears in the Rules of 1821 and 1825, namely, that "the management adopted in the Retreat at York shall be closely followed; and a copy of the account of that mild and excellent Institution drawn up by Samuel Tuke, Esq., shall be on the table in the Directors' room for the perusal of all concerned with the Establishment."

The committee at this date were six in number, under the chairmanship of David Blair, Esq. The house visitors, three in number, Thomas Kidd, Esq., Dr Alex. Stormonth, and Dr Pat. Nimmo. Alex. Ramsay M.D., was Physician; Chas. Y. Roger, Treasurer; Thomas Drummond, Secretary; W. Radley, Superintendent; and Mrs Radley, Matron.

With the year 1830, as stated, the Asylum entered on a new phase of management. Mr and Mrs Hadley, who had acted as Superintendent and Matron since the opening of the Asylum, resigned their appointments, and Mr Alexander Mackintosh and Mrs James Hunter were elected their successors, and the following record is given of these officials:—

"Mr Mackintosh not only produced, prior to his election, the most unexceptionable testimonials to character, conduct, and capability, for from his previous habits and line of life he seems to be particularly well qualified for the systematic discharge of the duties to which he has been appointed. For five years he was the Superintending Steward at the Military Hospitals of Barbadoes and Demerara. In these stations he had the opportunity of acquiring considerable proficiency in the theory and practice of medicine and surgery, and, having since his return home applied himself to the study of the above sciences, may at any time take his degree therein, if it should be thought advisable for him to do so with the view of meeting the provisions of an Act of Parliament passed in the latter part of the past reign for the better regulation of Lunatic Asylums.

"To these professional attainments Mr Mackintosh from his military education unites a thorough knowledge of the best means of exacting and maintaining without any unnecessary harshness or severity an uniform and regular system of discipline, a requisite of incalculable value in the management of a hospital for the insane."

While in regard to Mrs Hunter it is stated "that the greatest recommendation, in the judgment of the Directors is the experience

which she has had in all the details and management of Lunatic Institutions from her very infancy. Mrs Hunter being the daughter of Dr Haslam, late Surgeon Apothecary at Bethlem Hospital, and author of one of the best treatises on Insanity which has been hitherto published."

That the confidence reposed in Mr Mackintosh (afterwards Dr Mackintosh) was fully justified, the after history of the Asylum amply shows.

The subjects which now chiefly engaged attention were the extension of means of occupation and the introduction of public worship, a matter in which, as might be supposed, strong and opposing views were entertained at the time.

"The Directors," says the tenth Report, "feel it to be a duty imperative upon them to fall upon some plan without delay by which the labouring class of patients in the Institution under their care may be employed in those labours and trades to which they were accustomed previous to their confinement.

"Another desideratum of which the Directors are anxious to see an experiment made, although it must be admitted that it is one which is by no means so generally adopted in Lunatic Hospitals as that just referred to, is that religious instruction and public worship should be afforded to the patients and to other inmates of the House every Lord's Day.

"The Directors do not require to be told that on the propriety of introducing public worship within the walls of a Lunatic Asylum, very discordant opinions still prevail. The notion, however, that religion is a frequent cause of insanity appears to be giving way in proportion as inquiries into the origin and nature of the disease become more general, more direct, and more free from prejudice.

"In one Asylum at least [that of Glasgow] a regular course of Sabbatical instruction has been found to be one of the most efficient means of moral and mental management."

The success of the Institution as a curative hospital may be estimated from the fact that since its opening to the present date 43 per cent. of the patients admitted were discharged recovered—"an average fully equal to that of the most celebrated Asylums."

It is in the Medical Report for the year ending 23rd August 1830 that we find the first reference made to the abolition of restraint—a subject which at this date excited, as might well be supposed, much interest, and was opposed and defended in manner of which now we have little conception.

Till 1829 it was considered, it may be said, absolutely necessary for the safety and welfare of the patients, as well as of their

guardians, that the more violent and dangerous patients, to a certain extent during the day and especially during the night, should have their movements restrained by strait waistcoats, wristlets, muffs, leg-locks, bed-straps, and other mechanical contrivances. In some Institutions as many as 50 per cent. of the inmates were so confined. The credit of suggesting the total abolition of all mechanical means of restraint is due to Mr Hill, House Surgeon of Lincoln Asylum, although Dr Charlesworth, the Physician of the Asylum, had for several years succeeded in materially reducing the number subjected to restraint. The idea, once suggested, took vigorous root, and, as said above, reached Dundee in 1830, as testified in the following extract:—"It has always been our wish to supersede restraint by care and vigilance, but a certain amount of coercion is absolutely necessary, and never can altogether be dispensed with in such a comprehensive charity as this, unless by encountering a certain and a much greater evil; though, at the same time, there can be no doubt that restraint upon a patient may operate as a premium on the indolence and carelessness of a keeper." It would be difficult to express the position more explicitly than this, and the extent to which this opinion became modified will be seen as the history of the Asylum unfolds itself.

The following extract from the Medical Report of this year shows also how thoroughly the true principles in the treatment of the suicidal had been appreciated:—

"In some modern Institutions rooms have been specially constructed for suicides [suicidal patients], and in others many comforts and conveniences and useful ornaments have been sacrificed, and even the external form and appearance of the buildings and grounds have been modified, for the purpose of safe keeping and stilling undue apprehension. But, although there be an evident necessity for guarding against accidents of every description, it is doubtful how far these means do not overstep the end, or even go to rivet and perpetuate the insane idea, by thus constantly recalling to it the recollection or forcing it upon the notice of the patient; whether the restraint upon the personal liberty and the repression of the active and voluntary powers for a series of years, as must often be requisite on this principle, be not a greater evil than the risk of life that may be contingent on a certain extent of freedom; whether a rare victim to this license be more to be deprecated than an eternal thralldom of restraints, or a constant privation of ordinary enjoyment.

The rates charged for the patients in the Asylum were always such as barely cleared expenses, private cases being received at

rates varying from 10s 6d to 63s per week. Parishes which had contributed to the erection of the buildings were charged 7s, from 1820 to 1828, and for the last two years only 6s, and all other parishes, and those not confined to Forfarshire, were charged 1s higher.

Steady progress continued to characterise the year ending 8th August 1831. The patients now numbered 110, 57 males and 53 females. The increased means of occupation, and the introduction of public worship were the principal features. The females were chiefly employed in the washing house, laundry, and kitchen, and in general housework as housemaids; others were engaged, however, in spinning, sewing, and knitting. Thirty to forty men were constantly occupied in garden-work, etc., and the amusements consisted of draughts, backgammon, cards, and drawing. A liberal supply of newspapers had been provided, and the Directors had under consideration the establishment of a library in connection with the house. Some patients, we find, were allowed to go to town to attend public worship there, others were sent messages to town, and some had been employed at a distance of several miles from the Asylum preparing sand for the garden walks, etc. The most important event, however, was the formal establishment of public worship in the Asylum. This took place on the 7th August 1830, in a room temporarily fitted, 66 of the patients being present, 8 of the servants, the matron and superintendent, the physician, secretary, and 4 of the directors, the ministers of the Established Church having kindly offered to officiate alternately in the forenoon of the Lord's Day.

The reduction of the number of patients subjected to mechanical restraint continued to be rigidly enforced. In the Director's report it is said: "At the present date the number of patients in the house is 110, and it will produce a feeling of surprise in the mind of everyone not acquainted with the nature of lunacy that among 57 male patients in the house not one of them has been for days subject to any restraint whatever, and that among 53 female patients 50 of them have been in a state of entire freedom, and all of them have been generally employed in those exercises which generally engage the attention of persons of sound intellect," but, it is added, "the safety of the maniac himself, of his keeper, and of his fellow patients must be attended to at the risk of every sacrifice, for no degree of restraint, however severe, should be placed in comparison with the loss of life." And then the writer adds words which might well be pondered over at the present day: "Restraint, however, has in most cases been found to produce

feelings of chagrin and irritation, extremely unfavourable to the comfort and mental health of the patient, and can only be vindicated on the plea of urgent necessity. The love of liberty is a natural feeling in the human breast, and man rises to his noblest station when this is gratified. Confinement, however, depresses our spirits, weakens our faculties, and impairs the energy of our frame."

During the year ending 9th April 1833 steady progress continued to be made in the employment of the patients. "Almost all the patients are employed in some kind of work or amusement. The females spin yarn, knit stockings, and make every article of clothing for themselves, and also shirts for the male patients. The males are employed either within doors in weaving cloth for the use of the establishment and for sale in the Dundee market, adding not a little to the funds of the Institution, picking oakum, etc., and in the grounds digging, weeding, and planting." Only three are now reported to be under restraint, and one patient of musical tastes and able to play the fiddle affords opportunities for evening dancing. It may not be unimportant to note that all patients were bathed once a week.

A regular chaplain was now appointed as one of the members of the staff (the Rev. J. Staling, who so long afterwards officiated with benefit and much satisfaction to his charge). Out of 125 no fewer than 100 regularly attended service. Another important change in connection with the staff should be recorded, namely, that Mr Mackintosh, who, as already stated, had the advantage of a thorough medical education, now took his Degree of Surgeon at St Andrews University, and thus fulfilled the new requirements of the Statute, namely, that the Physician should be resident in the Institution, where the number of inmates exceeded 100.

The increasing demand for admission now rendered it necessary for the Directors to turn their attention to the extension of the buildings, so during year ending 31st May 1834 we find this given effect to. The additions consisted of "a new airing ground, day room, and pertinents on the female side; the fitting up of the Committee or Directors' Room as a parlour for ladies of the highest class, and the building of a new range of office-houses, piggeries, and poultry yards."

The efforts to employ the patients were now pushed forward in the direction of securing occupation in the forms to which they had been previously accustomed.

"In a retreat for lunatics," says the Directors' Report for this year, "there must be nothing that bears the least resemblance to

the treatment of a prison, and the habits that prevail in an Asylum must approximate as nearly as possible to the manners and pursuits of the world. These are views that have been long before the minds of the Directors, but it is only during the last year that their wishes have been fully realised. The patient, so far as his circumstances will allow, is now restored to the habits of real life. Those who have a taste for reading are supplied with newspapers and books, and no publication is withheld that can contribute to harmless amusement or useful instruction. The enlivening influence of music has also been to revive the spirits during an hour of gloomy weather, or when the tedious evenings of winter necessarily gave interruption to active employment.

“Arrangements have been formed so that each patient, male and female, may return to their former occupations. On the male side the tailor has more customers in the House than all his exertions can supply. The shoemaker has laboured, not only for the benefit of his fellow-patients, but his shoes have been purchased by the friends of the establishment; and the workmanship also has been much admired. There are nine looms in constant employment, and as one workman relieves another at stated intervals, the labour never becomes irksome or unpleasant. Several of the patients have likewise acquired considerable dexterity in the manufacture of doormats and mattresses. Some of these articles have already been sold for the benefit of the House, and a further supply will be provided if the public will give encouragement to this branch of trade. In weather which does not admit of exercise in the open air, the patients are sometimes employed in teasing hemp and ropes, and although the employment be tedious and uninteresting, yet it has been found to be a happy substitute for complete idleness and vacuity. In an extensive establishment there must be daily services to perform, such as pumping water, carrying coals, cleaning and whitewashing the rooms, and these exercises afford a constant resource against the influence of langour and ennui.

“It may likewise be mentioned that some of them have been permitted to go several miles from the premises to prepare gravel for the walks. But the grand field of operation is the garden and adjoining grounds; and there are to be seen at the proper seasons, in well organised bands, the inmates of the Establishment sowing and planting, digging and raking, hoeing and wheeling, with a calmness and decorum undistinguished from the scenes of common life.

“But though the field be not quite so extensive on the female side yet there the spectacle is equally inviting and attractive. The

kitchen, laundry, washinghouse, and the extraordinary neatness of this establishment afford ample scope to female industry. Many ply at the wheel with that activity and diligence which they had acquired when they derived from this exercise the means of their subsistence ; and a workshop is now erecting, to give employment to those who had been formerly engaged in manufacturing pursuits. The needle, however, is the instrument most congenial to female taste ; and knitting also is an exercise in which many of them are not unwilling to beguile their lonely hours. The higher classes amuse themselves with fancy work."

"The following Table appended to this Report will give, however, a clearer idea of the extent to which occupation has now been carried :—

	Male.	Female.	Total.
Teasing hemp and tow ropes and picking oakum, - - -	17	-	17
Shoemaking and mending, - - -	1	-	1
Weaving linen for sheeting, etc., and cotton striped shirting and bagging,	9	-	9
Tailoring, - - - - -	1	-	1
Matmaking, - - - - -	1	-	1
Cutting firewood, - - -	1	-	1
Gardening, trenching and laying out grounds,	14	-	14
Mangling clothes, - - -	1	-	1
Pumping water for use of Establishment,	2	-	2
Domestic purposes, - - -	1	-	1
Dressmaking, - - - - -	-	2	2
Shoebinding, - - - - -	-	2	2
Spinning, - - - - -	-	12	12
Shirtmaking, - - - - -	-	4	4
Winding for weavers, - - -	-	6	6
Quilting, - - - - -	-	1	1
Upholstery work, - - - -	-	2	2
Staymaking, - - - - -	-	1	1
Flowering muslin, - - - -	-	1	1
Fringemaking, - - - - -	-	1	1
Repairing bedding and clothes, etc., -	-	3	3
Assisting in laundry, - - -	-	2	2
Do. scullery, - - - - -	-	2	2
Do. kitchen, - - - - -	-	1	1
Do. bedrooms, - - - - -	-	2	2
	48	42	90
The number of patients resident being	70	58	128

and with one or two exceptions included as employed all the pauper cases in the Asylum.

"The work actually accomplished included for the year:—1 web striped cotton shirting woven, 190 yards; 28 webs bagging woven, 1760 yards; 40 webs linen woven, 4480 yards; 52 pairs leather shoes made; 35 pairs leather slippers made; 22 pairs girth slippers made; 75 pairs leather shoes mended; 31 pairs trousers made, 10 cloth vests made, 4 cloth jackets made, 4 cloth coats made, in addition to many mended; 15 doormats made; 20 cwt. of oakum picked; 30 cwt. of hemp and tow ropes teased; 20 short gowns made; 50 long gowns made; 44 aprons made; 43 petticoats made; 80 caps made; 41 shifts made; 150 pairs of stockings knitted; 68 mattresses made; 80 bolster cases made; 117 pillow cases made; 60 pairs sheets made; 102 shirts made.

"In addition the ladies occupy part of their time in netting, carpet and rug work, knitting, and fancy works of all kinds."

Such is the satisfactory progress now accomplished, and it must have been satisfactory to the officials to find the Directors putting on record that "in these improvements the Directors claim no further praise than giving a willing and cordial assent to their introduction. To the Superintendent and Matron, by whom they were suggested, and by whose care and activity they have been carried into effect, is justly due all the credit and all the reward."

Public worship had now become part of the regular routine of the Institution, and the effects of its introduction, compared with what had previously been the manner of passing the time of the Sabbath Day, is so well expressed that no apology is necessary for giving it verbatim from this Report.

"Previous to experience there was much diversity of opinion as to the propriety of introducing public worship into any Asylum, and the objections to the measure must have preponderated in the public mind: for it is only at a recent period that the high privilege of joining with his brethren in religious exercises was permitted to any person subject to insanity. The objections must, however, have been grounded upon partial views of our nature—they did not refer to all the principles of our constitution. We all acknowledge that man is a being endowed with social feelings—he is born, he lives and he dies in society—and depending on the aid, service, and friendship of our fellow-men, in infancy, in youth, in manhood, and in old age, we are linked together with our brethren by ties of the most close and tender affection. Man in solitude is not in his proper element, his character is not developed, because there is no

scope for the exercise of those affections by which he is linked, or the discharge of those duties he owes to his fellow-men.

“Man is also endowed with moral principles. These are an essential part of our constitution, and in whatever age or country he lives—whether he roams as a savage in the desert, or tastes the refinement of civilised life—he is found engaged in some act of worship and acknowledging his dependence on superior power.

“The inhabitants of Scotland are early accustomed to moral training; their religious principles are exercised in childhood; and they who are accustomed to turn their thoughts to God, to behold every event directed by His providence, and rest all their hopes on His mercy in Christ—feel the sacredness of the obligation of meeting together on the first day of the week—of solemnising that day in which our Saviour rose from the dead, and when it is no longer said unto them, ‘Go up into the house of the Lord,’ when they are no longer permitted to join their voice in the song of praise, when their ear no longer listens to the joyful sound—this restriction is often felt as a grievance to the afflicted spirit, and aggravates any burden by which we may be oppressed. As many of the inmates of this Asylum on their silent and cheerless Sabbaths, like the Jewish captives by the rivers of Babylon, sat down and wept when they remembered their Zion, and as public worship had been introduced with the happiest effect into similar Institutions, the Directors had no hesitation in adopting their resolution, but were prevented for a time by the scantiness of their funds from the accomplishment of their wishes; and indeed it is only a temporary accommodation that they have been hitherto able to provide, for the building of a chapel must yet be reserved for a more flourishing state of the Institution. Though the members of the Presbytery of Dundee preached in the house so early as June 1831, it was only about the beginning of 1833 that a regular Chaplain was appointed; and whoever has witnessed the preparations made by the patients for their appearance at chapel—the solemn demeanour and strict decorum observed during the whole of the service, the close attention paid to the words of the preacher, and one of the patients occasionally officiating as precentor with becoming propriety and tasteful execution—will contemplate the picture with feelings of the deepest interest, and fondly hope that the swelling notes that delight the ear have proceeded from lips that God has touched, and the words listened to with such attention have been embraced by those whose heart has felt the power of Divine truth. The day of rest is now distinguished and enjoyed by the patient; instead of the hoe and the spade, there is put into his hand the Book of

God ; the exercises of public worship solemnise the remaining hours of the Sabbath, and lead the mind of the patient in a train of calm and holy meditation which other means would ineffectually produce."

The most important event during the year ending 31st May 1835 was the death of Dr Ramsay, who had held the office of Visiting Physician since the opening of the Institution. In the *Dundee Guardian* of March 3rd his decease is thus referred to:—"Perhaps the most enduring memorial of him, next to the cherished recollection of private life, will be the Dundee Lunatic Asylum, of which from its opening he has been the Physician, an Institution watched by him with the most anxious solicitude until it has acquired a measure of celebrity which the most sanguine could not have ventured to predict." He was succeeded by Dr Patrick Nimmo, "a gentleman in every way worthy and qualified to be his successor, whose long-established and well-known character and reputation in his profession are a sufficient guarantee for the skill and ability with which the duty of the medical department of the Institution will continue to be discharged ; and his kindness of disposition and conciliatory manners are a pledge that the system of mild treatment, which has been brought to such perfection by the Superintendent and Matron, will receive the same sanction and encouragement from the present as it did from the late Physician." Another important matter was the reduction of the rate of board of pauper patients from privileged parishes owing to the low price of provisions, and it is well worthy of notice that at this time the Directors seem to have believed in the possibility of admitting patients gratuitously. "A principal object," the Report says, "with every Board of Directors ought to be to liquidate the debt as speedily as possible, because whenever this shall be done the Asylum will be enabled to throw open its doors gratuitously to the poor of Dundee and of the parishes which contributed to its funds at its commencement, and to receive the poor from a distance at a much lower rate than what is now from necessity demanded."

The necessity for a liberal dietary for the patients continued to be recognised and acted upon, as "there is no position in medical science more firmly established than the absolute necessity in giving not only a sufficiency of food, but food of the best and most nutritious kind, to insane persons. Instances might be multiplied without number, both in public Institutions and private Asylums, where the most disastrous consequences have ensued under the attempt to diminish the quantity or deteriorate the quality of the diet. This is a fact deposed to with a weight of irresistible evidence

in Pinel's valuable treatise on insanity, and he asserts it as the result of his experience that not only insufficiency but inferiority of food is not a little calculated to exasperate and to prolong the disease."

Another point which engaged the attention of the Directors was additions to the buildings. The principal addition was the completion of a set of workshops for the female pauper patients, "which have been erected immediately on the ground adjoining the south east corner of their airing court, and to which they have access from the main building under cover all the way. The shops consist of three apartments, one for the oakum teasers, one for the spinners, and another for the weavers; and in the upper storey is a room at present occupied as a sleeping apartment, but which is intended to supply what has long been a desideratum, in the opinion of the directors, namely, a Hospital into which, in case of any epidemic breaking out, the sick may be removed out of the main building, and thus every chance be afforded of checking the spread of infection. Among the suggestions of further improvements we find included 'the introduction of gas' (the Institution having hitherto been lighted by oil lamps) and 'a billiard table for the use of the gentlemen.' Out of the 96 pauper patients on an average resident, 92 were generally employed, and of the 130 in all about 100 regularly attended Divine Service. We also find that the fidelity of the attendants was not overlooked, as a record occurs of 'two guineas and a half being given to Thomas Lumsden' as a gratuity for particular fidelity and good conduct." Although at this date a higher proportion of the patients were employed than at any Asylum in the country, "Dr Ellis, the talented physician of Hanwell," is frankly acknowledged to have been the first to introduce a system of manual labour, and in England to have brought it to the highest pitch of perfection.

During this year regular tables showing the number of patients annually admitted, discharged, and who had died; the causes producing the attacks of those admitted; their ages and causes of death, etc., were begun and afterwards regularly published.

The salaries now paid to the principal officers were:—Superintendent, £120, plus gratuity of £15 15s 8d; Matron, £70, plus gratuity of £15 15s 8d; Physician, £75; Chaplain, £20; Secretary, £20; and Treasurer, £75. The pecuniary profit of the patients' work amounted to £188 15s 11d.

During the year ending 31st May 1836, the literary wants of the community were further supplied by the introduction of

several newspapers and by subscriptions to the public libraries, and we find a donation of £2 2s "was granted to Isabel Somerville, one of the female keepers, to mark her diligence, fidelity, and humane attention to the comforts of the patients during a period of upwards of seven years service in the House."

The new officers entered on their work, namely, Dr Nimmo, Physician; Mr Berry, Treasurer; and the Rev. John Robertson, Secretary. The Medical Report testifies that "the patients have enjoyed as much freedom as could possibly be permitted them, restraint being never had recourse to till unavoidably necessary. Many of the ladies and gentlemen were allowed to walk with their attendants into the town or country, or to spend the evening and drink tea with their relatives and friends; and twelve of the patients, six males and six females, were taken to the circus."

With regard to the medical treatment, it was generally found that on admission the patients were "so very much reduced as to render it improper or dangerous for any active measure to be put into execution," and it is added: "A few of the agents, in a general manner may be mentioned, which we are in the habit of using—cupping, leeching, applying setons, embrocations, lotions, baths in almost every form, aperients, cathartics, narcotics and tonics, such as rhubarb, sulphate of magnesia, castor oil, croton oil, colocynth, aloes, calomel and jalap, opium, hyoscyamus, quinine, gentian, soda emetic tartar, etc. etc. General bleeding in no case has been had recourse to."

The Annual Report for the year ending 31st May 1837 opens with a reference to the loss which the Asylum sustains by the death of Mr Blair, of Cookston, who for thirty years had been intimately associated as Chairman with the History of the Institution. In 1830 a full-length portrait of Mr Blair was painted by Colvin Smith at the request of the Directors and placed in the Committee Room, and the Report states—"The name of Mr Blair will descend to posterity associated with this excellent Institution, and hold a place in the list of our public benefactors," and such has truly proved to be the case. As the number of male patients exceeded the accommodation, the Directors decided to extend the buildings "from the south wing to the centre of the building, including the centre day room, at a cost of £1,800. Out of a total population of 134 about 130 generally attended chapel, and the religious exercises are found to soothe, console, and elevate the minds of the patients."

During the year ending 31st May 1838 the financial state of the Asylum threatened to be disturbed by "an unexpected charge of

£83 2s 3d for Assessed Taxes on windows, keepers, etc." This, however, appears to have been subsequently withdrawn by the Lords of the Treasury, but only after an appeal from the decision of the County Commissioners to the Barons of Excheques had been made by the Surveyor of Taxes and thus unsustainable. In regard to the condition of the patients, it is recorded with satisfaction "that with the exception of two males and two females, the whole of the patients are free from every kind of restraint whatever."

In the Abstract of the Medical Report an interesting case is referred to, showing the successful and beneficial effect in perseverance in attempting to induce the patient to engage in work. It was that "of a cabinetmaker admitted labouring under deep-rooted melancholy who had been nearly twelve months affected. All kinds of treatment were tried, and at last successfully, and apparently from persistent efforts to induce the patient to work at his usual trade; a bench was got and wood purchased, and his tools were procured. The patient shed tears when he saw them, always said he was just going to begin work, but something mental always prevented him, and this continued for nearly eight months. Then the depression almost left him and he began to work in earnest, made handsome chests of drawers, etc., and was finally cured."

Another case is referred to where a patient, who had been bred a flesher, made himself generally useful in slaughtering and cutting up the pigs for the use of the Institution.

Female as well as male patients, were engaged in reaping corn, and although this necessitated the use of the sharp sickles in shearing, no accidents resulted.

During the year ending 31st May 1839 continued efforts were made to increase and vary the means of amusement and occupation; excursions into the country were more frequently indulged in, and for this purpose open and close carriages were provided twice a week. One case of occupation was so unique that it ought not to be passed over—"A lady patient of the highest class expressed a desire to have some children put under her care, and her wish was gratified. A few children from the neighbourhood attended daily, and she superintended their education, not only with maternal tenderness, but with prudence, temper, and judgment, and to herself the occupation was beneficial, for amid the privations to which she was necessarily subjected she had the satisfaction of feeling that she was not altogether living in vain, but was employing the means within her power of conferring some benefit on others."

About this period a subject was engaging the attention of all who took an interest in the treatment of the insane, and led to

much controversy and opposition—namely, the abolition of restraint, or, in other words, the possibility of doing away with all strait waistcoats, bed-straps, muffs, wristlets, &c., in connection with Asylums. As may be supposed, great diversity of opinion existed; and although the Dundee Asylum was among the first that did away with all instruments of restraint, it will be seen from the following extracts that this was not accomplished without considerable difficulty. The movement commenced in the Lincoln Asylum, Mr Hill, of that Institution, asserting “that in a properly constructed building, with a suitable number of suitable attendants, restraint is never necessary, never justifiable, and always injurious in all cases of lunacy whatever.” At first the Directors of the Asylum held opposite views, and their observations give a very good idea of the nature of the opposition offered. They say:—

“It is believed that if this point were to be settled by practical men Mr Hill would be left in a very small minority. But even allowing the practicability of the measure, whether it be humane and desirable is a question that appears to be very problematical. If the mind of a patient can be subdued by the power of intimidation, so as to paralyse his efforts in the hour of maniacal paroxysms [it will be seen from this how thoroughly the problem was misunderstood], would his condition be more happy or his welfare more promoted by being under the influence of terror? Is it better to enslave the mind than to enchain the body? May there not be greater benevolence and sympathy in subjecting the members of the body to the salutary restraint than in the exercise of a moral discipline which will ever appear to human feeling burdensome and oppressive? Instances are not infrequent of patients, when warned by symptoms of approaching paroxysms, requesting to be placed under temporary restraint, and, when the hour of illusion has passed away, are happy in the reflection that they have been without the power of committing an act which reason and conscience condemn.

“With the exception of instances of very violent excitement, where there is a strong apprehension of danger to the patient himself, or to others, there has been no restraint ever imposed on the inmates of this House; and while all necessary precautions are used for the safety of the individual, all compulsory measures are carefully and anxiously avoided. It sometimes happens that all the patients of every class and in every stage of the disease are free from every kind of restraint whatever; but as some restraint might occasionally be found necessary among the same number of persons of sound mind, placed in similar circumstances, it is not thought

proper that in an establishment of lunatics the life of an individual be placed in jeopardy, or the general comfort of the inmates be disturbed, in support of a theory which seems to aim at ideal perfection rather than to promote practical utility. At the present moment there are only three males and two females subjected to temporary restraint—some of them have no consciousness that they are suffering any evil—and in every society it is unavoidable that a person who disturbs the peace of others suffer for the sake of the public weal.”

And in the Medical Report restraint is briefly referred to in the following words :—

“ A furious maniae must be restrained, so must some destructive and some suicidal lunatics. The restraint is applied because it is absolutely necessary for the safety of the patient as well as those near him. Words have no effort upon the unfortunate person, and he must be prevented from doing injury to himself or others by being placed—and humanely placed—under temporary restraint.” There are grounds for believing, however, that Dr Mackintosh, although signing the report, did not agree with the opinion here expressed.

Such were the views at first entertained and the arguments used against this important movement: how they were overcome and gradually disappeared will be seen as the history unfolds itself.

The state of the building at this time again engrossed the attention of the Directors. During the last 30 years the population of Dundee and neighbourhood had almost tripled itself and in a short after its opening the Institution had been found quite inadequate to meet the demands upon it. The plan originally proposed by the first Architect, Mr Stark, had to be modified, and a new one by Mr Burns adopted.

From year to year, and as the finances permitted, the buildings had been remodelled and enlarged to meet the demands for admission. At first the centre part of the building only was finished and used. In 1825 the female north wing (N.E. block) was built, and contracts had now been entered into for completing the whole of the males (West) side according to Mr Burns's plan. The accommodation being considered insufficient it was now proposed to finish also the female or east side and so complete the whole of Mr Burns's plan (the enlargement of the buildings was commenced in 1825, the south wing on the male side was made in 1837, and the whole male division was finished in 1838. The south wing on the female side was erected in 1839, so that all that was now required was the widening of one storey building between the

north and south wings on the female side and the completion of the second storey between these wings). Unfortunately this was never given effect to and ultimately led to the adoption of a policy of restricting the admission of patients to the available accommodation instead of building to meet the increasing demand, a policy which in after years told very seriously on the prosperity of the Asylum. In fact during 1837-8 many female patients had been refused admission from want of accommodation, but after the building referred to had been finished, during the following year all were received for whom application was made.

It is interesting to find recorded that £28,000 had been now expended in the erection, furnishing, and tear and wear of the Asylum, equal to £175 per head of average resident population, but this was considered moderate, as in the case of Hanwell Asylum, erected by the County of Middlesex, the cost had been £160,000, equal to £266 for each of its 600 patients.

An entry well worth recording occurs in this year's Report. According to one of the original regulations of the Institution it was ordered that the management of the Retreat at York should be assumed as the model for all the Dundee Asylum management, and that Mr Tuke's book was to lie continually on the Committee Room table for the guidance of the Directors. During this year Mr Tuke in visiting the various Asylums with the view of introducing some further improvements regarding the employment of the patients into the Retreat, visited Dundee and inspected the Asylum. He was so pleased with the result that he entered in the Visitors' Book, "I have come to learn and admire"—signed, Saml. Tuke; and the non-resident surgeon who accompanied him wrote, "I concur"—signed, Caleb Williams. The Dundee Asylum had thus now outstripped its model.

In the Report for the year ending 31st May 1840 we find the Directors complaining of a falling off in the amount of voluntary contributions and donations. Their attention, however, was much given to the all-absorbing question of the abolition of restraint, but the following extract will show that they were far from being inclined to favour the new views :

"The subject of personal coercion or instrumental restraint is exciting much attention by those who are entrusted with the charge of the insane. At no remote period the idea of a Lunatic Asylum was associated with a confinement not only close and rigid, but from which there was little hope of deliverance. The mild and gentle treatment which succeeded was hailed with delight by every one interested in the welfare of our race. Philanthropists,

however, have not been satisfied with the achievements already obtained ; they plead for still further liberty and comfort to the patient by abolishing every kind of restraint whatever, and hold that all coercion—chains, strait-waistcoats, hand-straps, leg-locks—ought to be at once excluded from every Lunatic Asylum. We question not the motives of the gentlemen ; we hesitate in respect to the practicability of their scheme ; we are doubtful if the real comfort of the patient would be promoted by it ; we are afraid that in all cases pecuniary means could not be furnished to provide keepers in such numbers and of such power as to supersede the necessity of personal restraint. It is readily granted that the instruments employed in restraining the patient ought to be of the most approved kind, occasioning as little annoyance as possible to the patient, and on no account to be injurious to his bodily health ; and the difference of opinion between those who hold that a patient should not be subject to personal coercion excepting under the circumstances of the most pressing necessity, and those who hold that every kind of instrumental restraint should be abolished, is not very important. It is admitted on all hands that a patient during a period of violent paroxysm must be restrained. He is not in a state in which he can enjoy true liberty, either in respect to his own preservation or the safety of others. The real question then is, not whether the patient is to be restrained—because upon that point there is no diversity of opinion—but what are the most fit and suitable and safe means by which the end of restraint can be promoted. It is not asserted that moral means can on all occasions coerce the violence of the maniac, or calm the passions that rage in the disordered breast ; and though it were practicable to subdue his fury through the influence of fear, his treatment, instead of being mild and gentle, might really be cruel and oppressive.

“ As it is universally allowed that a patient must be restrained, the real question is, By what kind of instruments is this restraint to be effected ? Our manufactures have reached their present perfect state by successive inventions and improvements in the instruments by which the work is performed, so the treatment of lunatics will advance to perfection as new inventions take place and new improvements are made in the instruments by which they are restrained.” And so on.

It is creditable to the writer, however, that he adds the following paragraph :—

“ A superintendent may, in the full enthusiasm of professional celebrity, be able to infuse into the keepers under his direction such a spirit of vigilance and activity as will have the happiest effect in

promoting the peace and quietness of an Asylum ; but this zeal cannot be long sustained—it will gradually subside—and the funds provided for the maintenance of the poor, at least in Scotland, are not sufficient to afford such a supply of keepers as to supersede the use of the instrumental restraint. The gentlemen now engaged in conducting Lunatic Asylums without the use of instrumental restraint have every claim to our respect ; some of them have names of high authority on every subject connected with insanity ; their motives are humane ; their designs are to promote the public welfare. Moral influence alone, however, in subduing and regulating stubborn and refractory patients, must be tested by a long series of experiments before the principle can be fully established, and be held to be of universal application.”

It will be seen that the writer reaches the very kernel of the subject when he virtually implies that the possibility of abolishing restraint depends on a liberal supply of careful attendants.

The principal events during the year ending 15th June 1841 were the resignation of Mrs Hunter, who for ten years had so efficiently filled the office of Matron, on her appointment to the responsible position of Matron of Bethlem Asylum, London, and the appointment as her successor of Mrs Kilgour. The Directors, notwithstanding there were thirty-three candidates, adopted the bold policy of selecting a lady who had had no experience of the insane ; but she is described as an individual of excellent education and abilities, of affable manner and good address, and *of the very first moral powers*, and her after career amply showed that no error had been made in her selection.

The introduction of regular public worship into the Asylum on Sundays had proved to be so much appreciated by the patients, and to have produced so beneficial results, that it is not to be wondered at that the propriety of allowing them to attend the celebration of the Lord's Supper should have come under consideration, especially as already in some of the English Lunatic Asylums it was customary for the Chaplains to administer the Holy Communion in the chapels of these establishments. We accordingly find that in the Report for the year ending 31st May 1842 the Directors thus refer to the subject :—

“It affords the Directors of the present year the greatest gratification to be able to add their testimony to that of their predecessors in office to the happy effects on the patients that continue to be experienced from the devotional exercises of the Sabbath, and to mention that so favourable has been the result that in the course of the year of their management they have been

encouraged to venture upon a bolder step, and to give to such of the patients as expressed an earnest wish upon the subject, and whose diseases, in the opinion of the medical officers, were not of that character as to be likely to suffer any increase from a compliance with the request, permission to attend the celebration of the Lord's Supper in the places of worship to which they formerly belonged." The patients who were granted this permission "conducted themselves throughout in the most devout and proper manner, and the experiment, therefore, was completely successful." It may be mentioned that the practice here laid down was ever afterwards followed in the Dundee Asylum in regard to this solemn matter. Persons able to take part in this ordinance, it might be supposed, had little cause to be detained in an Asylum, but still from time to time cases do occur where the mental malady is of such a character, and where the patient might be capable of thoroughly appreciating the nature of this ordinance. The practice, therefore, has always been to allow the patients to have interviews with the clergymen of the churches, and when they are satisfied as to the propriety of the step, to allow the patients to attend the respective churches either alone on parole or accompanied by an attendant or friend.

Another extension of religious exercise which was at this time instituted, and for many years afterwards exerted a very beneficial influence, especially on the female patients, was a modified form of family worship. It was conducted in each day-room by an attendant competent to discharge the duty, the service generally beginning at 7 P.M. No force or compulsion whatever was used to enforce attendance. The majority, however, were almost invariably present, and were each provided with a Bible. A few verses of an appropriate Psalm were first sung; then one or two chapters were read, either by the attendant, or more frequently verse about by the patients as well as the attendant; a few more verses of a Psalm were sung, and the attendant then read a suitable prayer from a prayer-book. This simple service gave the greatest satisfaction, and seemed to meet satisfactorily a want which otherwise would have been keenly felt by many.

Among the other improvements effected during the year "was equestrian exercise afforded to the ladies," when the horse was not otherwise employed; the introduction of gas over the whole establishment, the provision of a set of fire hose for the fire engine and the training of a fire brigade of patients and attendants to meet any emergency, a new water cistern, the laying down of several new drains, and the erection of piggeries and a straw-house. The greatest and most unexpectedly heavy outlay, however, was the

sinking of a new well 8 feet in diameter. The difficulty of this was greatly increased by the remarkably wet season, "so that when the workmen reached the quicksand such volumes of water rushed in upon them as not only to retard their operations, but to render the adjustment of several pumps necessary to keep the water down." Tradition says that when completed the water came away with such violence that the workmen had difficulty in getting safely to the surface, and had to leave their tools in the bottom of the well.

The expense incurred in sinking the well with other minor causes so affected the finances that the Directors found "it impossible to undertake what under more flourishing circumstances they would have been most happy in undertaking, namely, the building of a house for the Medical Superintendent, etc." The instruction of the patients in reading, writing, etc., was continued, and a curious instance of inverted benefit is quoted, namely, where one of the lady patients derived benefit "in giving the Matron's son instruction in music on the piano and lessons in the French language."

On 15th March 1843, the ordinary routine of the Establishment was agreeably varied by a proceeding that well deserved to be referred to somewhat in full, and the following is the account abridged as given in the *Dundee Warder*. "Joseph Mainzer, Esq., the celebrated musical composer, then visited the Asylum, where he delivered a lecture to about seventy of the male and female patients, in the presence of the Chairman and other Directors. The patients were arranged in the hall of the east wing of the building, the males on one side, and the females on the other, and the lecturer and visitors were in front. The exhibition here was most interesting, not only from the hearty manner in which the unfortunate patients seemed to enjoy the lesson, but from the decorum observed by them throughout, and the intelligible manner in which questions put to them were answered. Several exercises were sung in good harmony—the male and female voices singing two different melodies. Mr Mainzer sang the celebrated Tyrolese 'Song of Liberty.' A solo was also sung by one of the patients. Two of them were in possession of violins, and, at the request of Mr Mainzer, favoured the company with an exhibition of their powers on that instrument. 'Auld Lang Syne' was struck up, accompanied by the voice of one of the performers in a very amusing way, and apparently to the intense delight of the patients. One of the females being requested to play a tune on the piano, complied at once, and so much did she appear to enjoy her own music that it was with some reluctance she was prevailed on to leave off. Several stranger ladies

and gentlemen entertained the patients by singing and playing. Mr Mainzer then said he would close the lesson by singing the 'Old Hundred,' which, being led by one of the ladies, the whole of the patients joined and sung the tune with much solemnity. This being considered the finale, one of the patients stood up and thanked Mr Mainzer very kindly for his visit, expressing the pleasure they had felt in going over the lessons. The company then began to retire, in the midst of which the two fiddlers struck up an enlivening tune. One of the patients afterwards wrote a very good article descriptive of the event, which appeared in print." The above has been given in full as it so graphically describes the progress which had been reached in the treatment of the patients.

The marriage of the head female attendant afforded the occasion of another entertainment for the patients. The following notice appeared in a local newspaper.

"Married at the Dundee Royal Lunatic Asylum, on 26th June, Captain John Paton, master of the Schooner 'Mary,' to Miss Isabella Somerville, head female attendant there. We mention this as well to notice the good conduct of a faithful servant, whose long services have been highly appreciated, as to state that a grand fete was given in honour of the occasion, at which about ninety patients were present. The colonnades and rooms were tastefully decorated with evergreens and flowers, flags were hoisted and cannon fired. After partaking of tea and cake on the lawn, the patients adjourned to the hall, where many of them afterwards joined in the dance, the music being performed by one of themselves. There has been no entertainment like it since the opening of the house. A select number of patients also saw the marriage ceremony performed."

Attention continued to be given to the best means of securing information in regard to the histories of patients before admission. As early as 1838 printed schedules, to be filled up by relatives and guardians, with the assistance of the Medical Attendant, were in use. These were now considerably enlarged with the view of obtaining as full a record of the case as possible.

With the assistance of Mr Farr, a Government Officer who had greatly distinguished himself by his writings and statistics, and aided also by Mr Roy, the teacher of Mathematics in the Dundee Seminaries, the statistical tables were extended and improved, and it may not be out of place to state that as the result of treatment for thirteen years it was found that the annual average mortality had only been 5.86 per cent., while the per cent. of cures on the gross number admitted during that time was 44.61.

During the year ending 17th June 1844 the attention of the

Directors was chiefly taken up with the erection of the new laundry, the readjustment of several day-rooms, the completion of the introduction of gas into the Institution, and laying of pipes in connection with the new well. Yet with all their care and efforts it was found necessary to refuse admission to many female patients from want of room. It is interesting to find that nearly the whole of the buildings were fireproof.

The success of the Asylum now attracted many illustrious visitors, including the Duke of Richmond, Earl of Mansfield, and Lord Henry Lennox.

The treatment of the patients continued without the use of restraint, none having been so confined since 1841.

The difficulty in finding accommodation for females was even more marked during the year terminating 16th June 1845, as it is recorded that the Directors had been compelled to deny admission to thirty-one patients. In the light of after years the refusal of admission instead of at once extending the accommodation must be looked upon as a grave error, and one that led to serious financial difficulties afterwards. Of the patients resident twenty-five were "Prisons' Board Lunatics" (criminal lunatics, and many of them of a very dangerous character, four having originally been confined in consequence of having attempted to commit suicide). The matters which chiefly engaged the attention of the Directors at this time were the consideration of the erection of a hospital for the sick, "more especially in cases of epidemics," a proper chapel to accommodate healthily the increasing number of patients, the erection of mounds in the airing courts to enable patients to enjoy more thoroughly the extensive view of the Tay and the surrounding country, the addition of dressing rooms to the bath rooms, and an improved system of heating and ventilation. An interesting event, showing the interest taken by the Officers of the Asylum, was the visit of the Matron to Asylums in England and France, her object in visiting the Bicetre being specially with the view of studying the system of education for teaching idiots, as well as patients under other forms of mental derangement, then in full and successful operation. The Report records that "from what she observed in this school under M. Voison, the originator of it, she came away with all her previous convictions on the subject completely confirmed, that what she herself had introduced into the Dundee Asylum in 1842, and continues to this day successfully to perform, was perfectly practicable by means of zeal and industry in any institution whatever of a similar kind."

In consequence of the increase of patients the Medical Superin-

tendent was authorised by the Directors to engage a Clinical Assistant, but without expense to the Establishment.

During the year ending 15th June 1846, reference is again made to the want of accommodation. Twenty-nine pauper lunatics, "some of whom had been incarcerated," were from want of room refused admission. "There can be little doubt," says the Directors' Report, "that the causes of so many uncomplained-with applications are twofold—first the extensive reputation which the Establishment has obtained; and second the low rate of board charged for this class of patients. The Directors, however, take special care that patients belonging to the privileged parishes are seldom or never excluded."

For years restraint of any kind had been practically abolished, and "the Directors now think it right to state, that the merit of introducing the system of non-restraint and of carrying it into such admirable effect, belongs not to the Directors, but solely to the Superintendent and Matron."

The following table shows how steadily and perseveringly this great improvement has been carried out. Table of restraint at twenty different periods taken from the Weekly Register of patients in the Lunatic Asylum of Dundee:—

Dates.	Total No. of men.	Total No. of women.	Total.	No. of men under restraint.	No. of women under restraint.	Total.
1828—Oct. 13	15	47	105	9	12	21
1829—Oct. 12	57	43	100	11	12	23
1830—July 19	52	45	97	11	14	25
July 26	52	46	98	3	3	6
1831—June 26	55	52	107	1	5	6
1832	67	54	121	3	3	6
1833	65	58	123	1	3	4
1834	70	58	128	1	2	3
1835	70	59	129	2	2	4
1836	70	64	134	2	2	4
1837	72	59	131	1	2	3
1838	80	64	144	2	3	5
1839	82	70	152	2	2	4
1840	80	72	152	1	1	2
1841	98	74	172	2	2	4
1842	100	78	178	—	—	—
1843	94	89	183	—	—	—
1844	95	88	183	—	—	—
1845	105	91	196	—	—	—
1846	100	93	193	—	—	—

Considering the importance which is now attached to night supervision, the opinion then entertained and which had been under consideration, justifies the following excerpt from the Medical Report being given in full: "When the Superintendent last year again visited France he saw very large dormitories in the Parisian Asylums, where attendants sat up regularly every night to watch and assist, there being a light and a stove in the centre of the dormitory, similar to what is found in the celebrated Hotel Dieu and other hospitals there. But we are of opinion that this sort of watching is objectionable, as it must necessarily often interrupt or disturb the sleep of the patients. In these French Asylums he was told that they had night as well as day attendants. In the Dundee Asylum the largest dormitory contains twelve bedsteads. Our attendants sit up when required on particular occasions, but this is seldom necessary, because their bedrooms are quite close to those occupied by the patients, and every sound, however slight, is immediately heard. With regard to the question of dormitories and separate sleeping rooms in Asylums, we agree with the more eminent authorities that there should be separate sleeping rooms for at least two-thirds of all the pauper patients. At present we have single bedrooms for only about one-fifth of the number."

Among the novel exhibitions enjoyed by the patients during the year was a visit from the famous General Tom Thumb while performing in Dundee. "This remarkable little Yankee dwarf delighted many of the patients. Some of them thought he was a doll and were anxious to touch him that they might be satisfied whether he was or not."

The question of the injury or benefit resulting from visits of patients' friends also engaged the attention of the Medical Officers, and they report that "experience has proved to us that in some cases frequent visits of friends do harm to the patient by agitating his mind and sometimes recalling painful recollections. We have often observed that these visits produce singular, or as it were, benumbing feelings over the patient's whole frame. On the other hand, when such visits are guided by the judgment of those who should know best whether they would be likely to be beneficial, and whose principal aim is to perform a cure, they are calculated to do good." The particulars of a case are then recorded where a female patient's children were sent for, a distance of upwards of twenty miles, were allowed to remain some hours with her, when marked improvement set in and terminated ultimately in recovery.

The addition of the Clinical Assistant to the staff was found to be of great service; and it is also noted that the male attendants

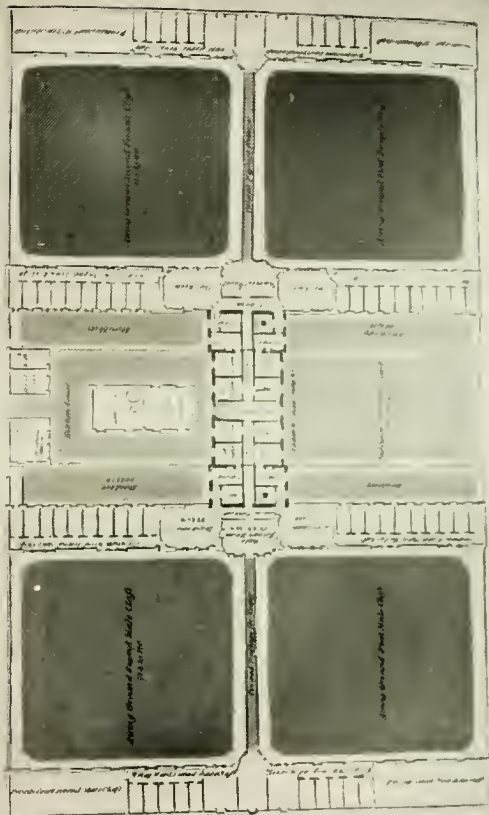
PLAN OF ATTACHED ALLEY



ATTIC STORY



GROUND STORY



PLAN AND ELEVATION OF MAIN BLOCK.

were "trained to make out daily returns," and thus more particularly and minutely to observe and note whatever of consequence might occur in their respective departments.

The year ending 21st June 1847 showed that "the pressure for admission into the Asylum had been very great, and in spite of all the Directors could do for their accommodation, no less than forty-one patients had been refused admission for want of room." Nor is it pleasant to find it stated that all that could be done "to meet as far as possible the demand for admission in the most urgent cases" was that "the Directors ordered the old wash-house and laundry to be fitted up for sleeping apartments, and one of the female dormitories that held seven bedsteads to be divided into four bedrooms conformably to the original plan."

Among the improvements effected during the year is one described as "greatly improving the convenience and elegance of the Establishment." The ordinary entrance to the House was from the north, and at the back of it (really the back-door entrance), and the only admission to the front lobby was by an inner door much too low. This door was raised to the proper height, and to facilitate the approach to the front door a new gate was opened in the surrounding wall immediately opposite the Asylum ground. This alteration is referred to as "an important one both from comfort and elegance. The main entrance is now opposite the ground belonging to the Institution. So soon as a porter's lodge is built, this will be the principal entrance to the Asylum, instead of the present back entrance, which has so long been submitted to in consequence of the low state of the funds." Now, it will scarcely be credited, but whatever may have been the co-operating obstructive causes, in consequence principally of the lodge never having been provided, the main entrance never was used except on special occasions, such as funerals, etc., and for the thirty-two years during which the Asylum subsequently existed the back-door entrance continued to be practically the only entrance to the Asylum.

The suicidal policy of excluding patients instead of providing additional accommodation continued, as we find it stated that "in consequence of the very great prevalence of typhus fever in Dundee, and considering that the bedrooms are crowded and no infirmary or sick ward within the Asylum, the Directors have resolved that no pauper patient shall be admitted from any non-privileged parish when the number of patients in the House reaches two hundred" (on 21st June 1847 the numbers resident were 106 males and 90 females), and while 57 patients had been admitted during the year, 41 were refused admission for want of room.

In this Report are also found the medical duties and responsibilities of the Medical Superintendent fully recognised. In justly "ascribing a large share of the satisfactory state of matters in the Asylum to the *official heads* of this Institution," it is added :—"The Consulting Physician devotes his high talents and great experience unweariedly and successfully to the discharge of his delicate and difficult duties. The Resident Physician and Superintendent, not more enthusiastic in undertaking onerous and varied labours than regular, persevering, and judicious in performing them, has commended himself to the Directors and the public by his invaluable services in this Institution for the last seventeen years."

The Medical Report for this year contains several interesting references. "Three patients were sent together by the Inspector of Poor under the Act 8 and 9 Victoria. They had been farmed out, and were labouring under organic disease of long standing." So "boarding out" was not unknown in those days, although not so strictly as now under statutory protection ; and so history repeats itself.

All the homicidal patients were removed to the Perth Penitentiary by order of the General Prison Board. "An interesting class notwithstanding their dangerous propensities"; but it is added, "It is right to state, in reference to these patients, that although they mixed freely with the other patients, they never did any mischief here."

Attention still continued to be given to enlarging the liberty of the patients. "The fêtes of the anniversaries this year all went off with still greater éclat than formerly. Some patients have occasionally gone to hear lectures in town, and also to visit exhibitions there ; others have been sent on business, such as that of returning webs to the manufacturer, or receiving materials for weaving ; and on some occasions patients are allowed to go to town even without an attendant. Carriage drives and picnic parties to Glamis, etc., are favourite recreations."

The English Lunacy Bill, then before Parliament, is also referred to as possessing "one feature which cannot fail to gratify every friend to humanity and justice. One of the chief objects will be the protection of pauper lunatics, an object which has been too long neglected over the kingdom." The Report adds : "If Parliament will legislate in the right spirit, that wretched and helpless class will no longer have the advocates of their rights complaining as we ourselves did in our Report for 1841. But in our opinion the Legislature ought to go farther, and, while doing justice to the

paupers, endeavour to throw the shield of protection over the wealthy lunatic at the same time."

"Safe custody is not enough, except in so far as it is a protection to the public; the comfort and the probable cure of the patient ought also to be attended to. A provision should be made also (in behalf of wealthy lunatics) that when such are sent to an Asylum no relative alone should have the power to remove the patient, or to limit at his own will the sum to be expended in the maintenance, comfort, and cure of the unfortunate person. We believe it is no uncommon thing for a patient with a *free* income of several hundred pounds a year to be restricted by his relatives to a mere pittance—say forty pounds—that they themselves may look forward to the enjoyment of the surplus when he is dead"; and it is suggested "that the power of removal and of limiting the allowance for his maintenance, comfort, and care ought to be exercised under the control of the Sheriff of the County."

"If a Board of Lunacy is to be appointed for Scotland, whether lunatics are to have the benefit of a trial by jury before admission or not, part of the duty of its Commissioners and Inspector ought to be to inquire into the state of the funds belonging to private patients, as well as into the condition and treatment of the patients themselves." This idea was given effect to in the Act of 1857, but the following was not, although it would undoubtedly have been of value—namely:—"The report of the Inspectors, *who should reside in their respective districts*, would regulate the judgment of the Commissioners, and they would, of course, remit to the Sheriff to determine accordingly."

During this year we have the first mention made of the proposal "to have water brought into the Asylum, when it is conveyed past the gate from Monikie, by the Dundee Water Company."

In the Report for the year ending 21st June 1848 we find the Directors acknowledging the assistance they had received from Mr Duncan, M.P., "in trying to prevent an additional tax for window lights being imposed." In this, however, they failed, and £19 16s 9d had to be paid for this tax instead of £2 12s 3d per annum.

The refusal of patients was persistently carried out, and while 23 males and 29 females were admitted, 20 males and 32 females were refused admission. The water question was again considered, "and having ascertained that the cost of partially introducing the water would be comparatively greater than if it were wholly taken in, an offer was made to the Company for a complete supply."

Illustrious strangers still continued to visit the Asylum, as we

find "that the Right Hon. the Lord Ashley, afterwards Lord Shaftesbury, accompanied by Sir David Brewster" were amongst the number, and "that his Lordship afterwards expressed himself very favourably as to what he had seen. From the character of his Lordship as a philanthropist, and also from the position he holds as Chairman of the English Board of Commissioners in Lunacy, any testimony coming from him cannot but be highly valued."

The most important question, however, which came under their notice was "The Bill to amend the Law of Scotland relative to the care and custody of lunatics," brought before Parliament for the first time. The importance which this and subsequent legislation had on the welfare of the Asylum renders it desirable that the whole should be given pretty fully, and the following is a verbatim excerpt from the Report of this year :—

"The Directors cannot close this, their brief Report, without expressing their continued conviction of the benefits which this Asylum has been the means of dispensing. They indulge a hope that it is still far from having attained its maximum of efficiency and prosperity, and that at no very distant period, the debt, its most pressing discouragement, will be removed. Within its management peace and harmony have reigned. It is impossible, however, for the Directors, at the present moment, not to feel in some degree anxious for the future, from the circumstance of a Bill having been introduced by the Lord Advocate into the House of Commons in April last, entitled, 'A Bill to amend the Law of Scotland relative to the care and custody of lunatics, and for the better regulation of Lunatic Asylums, and for the establishment of Asylums for pauper lunatics.'" The object of the Bill was two-fold—to change entirely the administration of public and private Asylums, and to establish and regulate Lunatic Asylums for the reception of pauper patients over the whole country.

It was considered that the enactment of the proposed laws would take the management of the Asylum entirely out of the hands of the Directors chosen by the different public bodies. The Committee of the Directors, therefore, deemed it their duty to ascertain the opinions of those in the management of other public Asylums in the country. The result was that they requested Mr William Thoms, one of their number, along with Mr John Sturrock, Junior, the treasurer, to proceed to London, in order to meet with those deputed from other Asylums, and endeavour to get the Lord-Advocate to alter the proposed Bill, so far as it affected this and similar Institutions. After being read a second time the Bill was remitted to a Select Committee. The deputation met with almost all

the members of that committee, and the Directors have great satisfaction in reporting "that the Lord-Advocate had agreed to alter the clauses originally proposed, so as to leave the Directors with the very same management they now have, subject only to such inspection as may be deemed generally necessary for all Asylums. The Directors considered that they would have neglected the rights and interests of those who, by their contributions, have established this Institution, if they had not objected in the most determined manner to the proposed Bill. Their objections will be removed in every particular if the Select Committee shall adopt the alterations recommended by the deputation and agreed to by the Lord-Advocate. From the opinions expressed by many of the members of that committee, there is every reason to expect that they will at once sanction these alterations, and thus justify the steps taken by the Directors for protecting the interests of this establishment, and so the apprehended danger to the status of this establishment and disinterestedness of feeling in the management of Asylums in Scotland will be entirely removed."

It may be well to mention that the only Public Asylums in Scotland at this date were the Royal or Chartered Asylums of Edinburgh, Glasgow, Dumfries, Dundee, Perth, Montrose, Aberdeen, Banff, and Elgin.

The health of the inmates during this year was severely tried by an epidemic of influenza and typhus fever. "Several cases of diarrhœa occurred in July and the beginning of August last," says the Medical Report, "when the weather was sultry and hot. These cases ceased as the weather became colder, and no bad consequences ensued. All over Europe, but particularly in England and Scotland influenza prevailed to a great extent in November last. Dundee in common with other large towns felt its effects severely; but there it was also unfortunately accompanied with the far more serious scourge of typhus fever, which raged throughout the winter and spring to a most unprecedented extent when compared with other years. In one week of November 1846, there were only 30 deaths in Dundee; in the corresponding week of 1847, there were 113. The weather during this sad mortality was moist and rainy, unusually soft and relaxing for that season of the year. So alarming an increase of deaths caused some of the educational seminaries to be closed. In the Asylum we had many cases of influenza, but they were comparatively mild, the servants of the establishment were the chief sufferers from that complaint, but all ultimately recovered. One of the male lunatics was attacked with common continued fever."

From the report for the year ending 18th June 1849, it would appear that the Poor Law Act, passed in 1845, did not have much effect in influencing the number of pauper admissions. An increased number "to a certain extent has occurred, but by referring to previous reports it will be seen that the number of rejected applications is not so great above that of former years as was anticipated." It is satisfactory, however, to find that the continued demand for admission at last roused the Directors to a consideration of the possibility of extending the accommodation, "so looking to the number of applications which they were reluctantly obliged to decline, and the confidence which they have in the increasing prosperity of the Institution, the Directors would have much pleasure in recommending to the consideration of their successors the propriety of extending the accommodation. Elevating the east wing, so as to render it conformable to the one on the opposite side (and thus completing the original design), would not only give the building a finished and more elegant appearance, but, what is of more importance, afford accommodation to nearly sixty additional patients. This could be accomplished at the expense of a few thousand pounds. But a glance at the debtor side of the abstract will show that such a proposition cannot well at present be entertained." The abstract referred to shows that at 31st March 1849 the debt due by the Institution was £8,760 12s 7d, and the total amount which had been expended on buildings and furniture was £33,301 4s 1d. The income for the year had been £4,660 1s 9d, but it may at once be stated that the completion of the building was never carried out. Indeed, it was already becoming evident to the minds of many interested in the Institution that at no distant date, owing to the rapid development of the town and the rapid extension in the direction of the Asylum, the entire removal of the latter to a more rural situation would have to be taken into consideration, and so the policy was adopted of restricting the admission of patients to the available amount of accommodation and economising expenditure, and thus reducing the debt as rapidly as possible with the view of carrying out the scheme of removal. But that this policy acted seriously on the prosperity of the Institution after events only too clearly showed. The real charitable nature of the Asylum was, however, always clearly kept in view, and its claims in behalf of the private class immediately above pauperism is well referred to as follows:—"Sickness combined with poverty is a great evil, but insanity conjoined with it is still more dreadful. The pauper lunatic, if his condition was ever overlooked in Scotland, is now provided for by compulsory charity; but there is a nobler

kind of charity, which spontaneously sympathises with the moral heroism of the man who struggles hard by honest industry to keep himself and his dependents above the degradation of pauperism."

"From the general opposition manifested throughout Scotland to the Lord-Advocate's Lunacy Bill of last year, it was thought unlikely that he would introduce a similar measure this session. A Bill was, however, brought forward by his Lordship resembling in many respects the measure of last year, but even more objectionable in some features. On a careful consideration of this Bill it was the unanimous opinion of the Directors that it became their duty to offer the most decided opposition to it. They considered that no necessity had been shown for the introduction of such a measure. No Parliamentary enquiry had taken place, and it was not even alleged that abuses existed in the management of Asylums in Scotland. The principle of the Bill was also considered highly objectionable in so far as it was calculated to supersede district and local management, and to centralise the control of Asylums in an irresponsible Commissioner resident in Edinburgh. The effect of this would inevitably have been to destroy all local exertion. It proposed to vest in this Government Commissioner the power of deciding upon the amount of accommodation to be provided, and the money to be raised in each district. No Government Commissioner could have the same interest in the good management of Asylums as gentlemen residing in the district. Besides, the effect of such a measure would be to extinguish all motive for the foundation or endowment of Lunatic Asylums by benevolent individuals, and to throw upon the property of Scotland a large and unnecessary expense both in the original erection and in the subsequent maintenance of the proposed Asylum." Such were the views which presented themselves to the minds of the Directors, and so impressed were they with the force of these and other objections that the deputation (Messrs William Thoms and John Sturrock, jun.) were reappointed, and on their arrival in London, where they were joined by other deputations, gave the most decided opposition to the Bill; and they had the gratification to find that the members of the House of Commons connected with Scotland of all shades of political opinion entered most readily into their views. The deputation were also favoured with interviews by some of the most influential of the English members, who seemed all to consider that if passed at all the measure would require to undergo very great modifications. The deputation left London under the impression that their opposition had been effectual, and that the Lord-Advocate would be induced by the universal opposition indicated to his Bill in Scotland

to abandon it, "if not entirely, at least for the present session, and they have now the pleasure to state that Lord John Russell has publicly announced the withdrawal of the Bill for the present session."

Another event of importance which occurred during this year has to be recorded, namely, the resignation of Dr Mackintosh, who had so long been connected with the Asylum, and had done so much to promote its welfare and success, on his appointment as Superintendent-Physician to Glasgow Royal Asylum. In noticing this event the Directors in their Report state that "they cannot condescend to use the language of adulation, but in justice to Dr Mackintosh they feel themselves called upon to state that to his devotedness and exertions the reputation of the Dundee Royal Asylum is in no small degree to be attributed. His valuable services have been no less useful in the treatment and to the comfort of the inmates than to the maintenance of that order and regularity which have at all times prevailed throughout the establishment since his connection with it; and while they express their unqualified approbation of his character, exemplary conduct, and ability, and their warmest wishes for his future success and welfare in life, they would congratulate the Directors of the Glasgow Royal Asylum on the fortunate choice they have made from among the candidates who aspired to the responsible trust of Superintendent-Physician of that large establishment."

Dr Mackintosh was succeeded by Dr Thomas T. Wingett as Medical Superintendent, who had "had much experience in the management of Asylums. For the period of four years he was the resident Medical Assistant to the Crichton Institution, Dumfries. He afterwards held the office of Assistant Physician to the Morningside Asylum for upwards of two years, during which he had the management, in the absence of the Visiting Physician, of all the pauper lunatics, and the principal control over the domestics of the establishment." In view of the change about to occur, it was remitted to Dr Nimmo (Visiting Physician) and Dr Mackintosh to revise the rules applicable to the offices of Physician and Superintendent, with the view of bringing them more into conformity with the practice of the House, the reason chiefly being that, as in terms of the statute it was necessary that the Physician should be resident, and Dr Mackintosh having been thus for a considerable number of years the Resident Physician, although Dr Nimmo, the Visiting Physician, still visited punctually three times a week, the actual medical treatment of the patients as well as their superintendence for long had devolved on the former

officer. It may not be out of place to refer to the manner in which the principal medical visit was made. "This regular and indispensable duty is daily discharged much more easily as well as more agreeably by the exercise of a little patient tact in getting the restless and unruly patients to keep quiet and conduct themselves in an orderly manner while the visit lasts. Even with the worst and most clamorous of them, with a few exceptions, a small piece of bread or some confections succeeds most effectually. At an early hour in the morning, the day-rooms having been prepared as speedily as possible, the pauper patients and those of a class or two above them are found sitting on forms and chairs all ready. The male attendant of the ward accompanies the Resident Physician and answers the necessary questions, and they are then prescribed for. The patients who require a more minute examination are afterwards separately examined. The Matron, of course, always accompanies him to the female patients, where the female attendants, like the males, are responsible for, and ready to report as to the state of, their patients. The latter immediately after go to their work or into the airing courts, where they are again seen occasionally by the Medical Officer during the day. The Matron then accompanies him to the males."

For many years the attendants of each ward had been trained to make up daily returns not only of the patients occupied and in what manner, but also frequency of pulse, state of bowels, tongue, etc., and thus materially assisting and facilitating the daily medical inspection. See tables for this year.

During the year ending 17th June 1850 the chief events were the painting of Mr Scott's portrait by Mr Stewart and placing it in the Committee-room; a letter from Dundee Parochial Board applying for reduction of rate of board owing to cheapness of provisions (the rate for privileged persons being 6s per week); and the visitation of cholera. The epidemic had been severe in the neighbourhood, and considerable anxiety being thus felt for fear of its introduction into the Asylum, all the precautionary measures recommended at the time were adopted. The attendants and servants were prevented from leaving the Asylum, and "communication with the suffering neighbourhood was suspended as completely as was practicable; ventilation and cleanliness were made as perfect as possible; the dietary and clothing of the patients were regulated with the greatest precision; every one was instructed to watch for and report the first approach of diarrhoea, and all kinds of fumigation and disinfecting agents were resorted to." But notwithstanding all these precautions two cases appeared. "The first

occurred on the 5th August, the other on the following day. Both were female paupers, and one of them died of the disease. In both cases the disease appeared in the most aggravated form, but why it should have confined itself to the female side was a mystery, as that portion of the Asylum was remarkable for the little sickness which its inmates suffered, only three female deaths having occurred during the year, whereas seven males had died." A similar instance, however, is recorded of apparently greater liability of the female sex to be attacked, viz. :—"At the Salpêtrière in Paris, an Asylum receiving female lunatics only, the deaths from cholera from the month of March to the end of August were 22 per cent. of the patients resident; while at the Bicêtre, which is an Institution receiving male lunatics only, the deaths from cholera were only 5 per cent. of the patients resident." Dr Sutherland, the distinguished Inspector of the London Board of Health, being in Dundee, made a careful inspection of the Asylum, but was unable to point to anything requiring to be done, and expressed himself as approving highly of all the precautionary and hygienic arrangements which had been made. The moment the disease had shown itself the patients were immediately transferred to a spare room in the garden used as a billiard-room, and completely isolated from the rest of the establishment.

The erection of a larger and better chapel and the completion of the female side of the building are referred to as desirable. During the year ending 16th June 1851, thirty-one patients were refused admission. Hitherto all applications from privileged parishes had been given effect to as having a preference, but it had now been necessary frequently to refuse admission even to these; and this was all the more to be regretted when it is kept in view that twenty-three of the parishes in Forfarshire were privileged at the rate of 6s per week, one of the lowest rates charged by any Asylum in Scotland.

During the next two years the chief matters engaging the attention of the Directors were an application for reduction of rate of board by the Liff and Benvie Parish; the inability to meet demands for accommodation; the question of completing the buildings and the erection of a chapel; but little progress in any of these matters was made, and no doubt from the feeling, though not openly expressed, that an extensive and more complete change was becoming inevitable. An interesting episode is recorded in the Report for the year ending 20th June 1853, namely the establishment of a school for the education of patients. It was conducted by one of the patients, a former schoolmaster, under the

care of an attendant ; “there for several hours a day were to be seen fifteen of the patients going through the usual tasks of reading, spelling, etc., with much the same order and decorum as exists in any educational establishment without the walls,” and the Directors justly compliment Dr Wingett, the Resident Physician and Superintendent, on his treatment of the patients.

During 1854 cholera again appeared in Dundee, but, “although it carried off hundreds of victims and protracted its stay in the town for many weeks,” did not extend its havoc to the Asylum community. How far this may have been due to the precautions taken against infection from beyond the walls or not cannot be affirmed, but it will no doubt be of interest to mention what these were. “So completely was the Institution exempted,” says the Medical Report, “that there was not even an unusual number of cases of diarrhœa during this anxious period. The whole economy of the Establishment was carefully revised, with a view to the removal of every possible and known auxiliary of the epidemic poison, and the diminishing to the utmost the number of our vulnerable points. It was thought to be judicious to depart from the ordinary routine career of the Establishment in two particulars only. The one was the interruption of communication with the town as much as possible by suspending the ordinary permission for admitting patients’ friends. The other was the refusal to admit any patient coming from a district where the malady was prevailing. The attendants and servants were also prevented from visiting the town while the disease prevailed. These precautionary measures were adopted as being a safe anticipation of the litigated and out-standing question of the contagiousness of cholera. To say how far they operated on promoting the object intended, or to point confidently to any conditions or arrangements as having been the agencies of our preservation would be presumptuous. Suffice it to say that, although the disease was rampant and virulent in dwellings situated within a few yards of our entrance gate, we were providentially and mercifully preserved.”

The year ending 18th June 1855 was an important one as embracing (1) the resignation of Captain Scott, who had so long acted as Chairman of Directors ; (2) the erection of a chapel quite apart from the rest of the building ; (3) the institution of a library for the use of the patients ; and (4) the visitation and inspection of the Institution by the Royal Commission. The statement in this Report of the Asylum’s indebtedness to Captain Scott is not overdrawn, and is as follows :—“Mr Scott is one of the earliest friends of the Asylum. He co-operated with its originators half a

century ago, and ever since he has superintended its affairs and promoted its interests and advancement with so much solicitude, constancy, and ability that in relation to him the Asylum itself is in an especial manner a standing record or acknowledgment of a public debt of gratitude due to him. His ingenuity and knowledge of the architectural methods for securing the highest amount of comfort and convenience are impressed upon every part of the building, and have contributed in a high degree to gain for it that reputation for judicious contrivance and arrangement which has been so frequently awarded. There is scarcely a stone or a beam, an inlet or an outlet, either above or below the ground, of which he cannot give an account; and, fortunately, his thorough sympathy with the afflicted on whose behalf he laboured, and his appreciation of the peculiarities and sensitive feelings characterising many forms of the malady, give a value and precision to his judgment upon any point connected with the Institution, in the highest degree trustworthy." In the first Report Mr Scott's name appears as a house visitor, and he had been Chairman of Directors for the last eighteen years.

With regard to the chapel, which was approaching completion, it was situated to the east of the Asylum, quite apart from the main building, although in close proximity to the female weaving and winding shops. It was, therefore, to use the expression of one of the patients, "a real kirk," and with its separate foundation and special construction was unprecedented among the Asylums of Scotland. During unfavourable weather it could be reached through the female airing court under the covered verandahs, but in fine weather the walk through the grounds to the church gave a reality to the service which could not otherwise have been secured. The building was of a crucial form, in light Norman style, neat, substantial, and commodious, and accommodated fully 150 hearers. The private patients and officers occupied the arms of the cross and the poorer class of patients with their nurses and attendants the main portion. The edifice cost £670. The Report contains the following admirable reference to the chapel:—

"In providing for the wants of the insane it is of consequence to give to everything as much as possible the form and pattern of ordinary life; to break through as many of the restraints as possible which distinguish the usages of sane and insane society. The plan of this chapel is admirably in keeping with this principle. To deprive patients of that which is familiar to them and that which they know others enjoy—which is offensively done when any extraordinary or exceptional methods for performing divine service

are resorted to—keeps the idea constantly alive that they are a peculiar congregation, and diminishes that enjoyment which services would otherwise impart. Public worship now forms an important part in the moral discipline of the insane. Religious impressions are among the first which the mind receives. They are also the last to fade from it. The sentiment of veneration as indicated by posture and the natural language of devotion, may be seen to be in lively operation in patients from whose minds almost everything else has been obliterated. This is obviously the reason why there is an unusual degree of calm and solemnity in an Asylum on the Sabbath day, and why the restless, the loquacious, and the irritable are enabled to subject their morbid tendencies to temporary restraint, and to fall into the requirements of decorum and order during worship in chapel. Facts of this nature point to the consolatory belief that however enfeebled and chaotic the mental powers may appear in their external manifestations, there may be still ‘an inner life hidden with God,’ remaining as a priceless and inalienable possession. The appeal made to the religious feelings, and the response thus elicited, have a healthy and healing tendency. Memories of former days are recalled by some when these duties were performed under other and happier circumstances; others derive benefit from the mere solemnity of the scene without having followed the teaching, while many enjoy a respite from perplexity and morbid trains of thought in attending to the service.”

The proposal for the formation of a small library originated with Mr T. W. Miln. A selection, consisting of 200 volumes, was made from the publications of the Religious Tract Society of London, and formed an admirable nucleus for future acquisitions. A regular and formal circulating library was soon in operation, an intelligent epileptic patient acting very efficiently as librarian. “He has marked,” says the Report, “and catalogued the books; keeps the record of the issues and receipts; and finds an ample reward in the opportunity for gratifying his own reading tastes which his position gives him.”

The most important event of the year, however, was the visitation and inspection of the establishment by the Royal Commission, which, as will afterwards appear, was but the prelude to the passing of the Lunacy Acts for Scotland, and which afterwards so seriously affected the management, and, it is not too much to say, the welfare of the Institution. “On the 10th April last,” says the Report, “it was gazetted that Her Majesty had been pleased to appoint a Commission for the purpose of inquiring into the state of the Lunatic Asylums in Scotland, and also into the present state of the

law respecting lunatics and Lunatic Asylums. The members of the Commission were Samuel Gaskell, Esq., Fellow of the Royal College of Surgeons; William George Campbell, Esq., Barrister-at-Law; Alexander Earle Monteith, Esq., Advocate, Sheriff of the County of Fife; and James Coxe, Esq., Doctor of Medicine. The Commission visited the Asylum upon the 11th May. They were occupied for nearly four hours in making a minute and careful examination of the Institution and its inmates; in inquiring into the rules and regimen adopted; and in examining the registers and journals. Whatever is found to be defective in the present arrangements for obtaining the necessary guarantees for the proper management of the Asylums of Scotland and for the humane and enlightened treatment of their inmates will be fully and prominently brought forward by the Commissioners, and will no doubt receive the proper remedy from the Legislature."

The work of the Commission was carried through with thoroughness and efficiency, and the results were laid before Parliament, and given to the public in the Blue Book printed in 1857. It extended to 257 pages, to which was added an appendix of 582 pages. It is a valuable record of the state of Asylums and of the treatment of the insane at that time, and the suggestion made by the Commission formed the basis of the Lunacy Acts afterwards passed. In the appendix is given the Report on the state of the Dundee Asylum, and the suggestions made for the improvement of lunacy affairs in Scotland. It may be well to give the opinion indicated rather than expressed of the Directors of the Asylum as embodied in their report:—"The experience of this Asylum tends to prove that the statute of the year 1815, which continued to be the law of Scotland in regard to lunacy affairs, has worked well. It provides for the visitation and inspection of Asylums by the Sheriffs or their Substitutes, accompanied upon each occasion by a medical practitioner. The advantages of this system are that the inspections are made by gentlemen officially attached to the district, the Sheriff himself having granted the warrants, and in many cases having become acquainted with the circumstances under which the patients were placed in the Asylum; they know the histories and families of many of the patients; and, what is of the utmost consequence, they have opportunities for becoming acquainted with the characters of the individuals to whose care the patients are committed which could not be secured by other arrangements."

The numbers of the patients were now 115 males and 95 females, and, as is learned from the interesting medical report for the year, seem to have developed into a large family party. The treatment

continued to be conducted on the principles formerly advocated, but now carried out into almost individual minuteness of detail and therefore high efficiency, a result which could never have been reached with a larger population. Many interesting particulars are given, but the following must suffice:—In referring to the principles which ought to direct treatment, Dr Wingett remarks, “Solitude when abused by its promiscuous adoption has the same pernicious and paralysing action upon the insane as upon the sane mind. It is as essential to avoid the removal of the ordinary impressions upon the senses and to encourage intellectual and emotional activity in the one case as in the other. In both cases it is true that without the stimulus of society the mind has a constant tendency to imbecility, torpor, and degradation. The histories of convents and monasteries, especially those of rigid rule, afford interesting exemplifications of the tendency alluded to. The antidotes to the action of this deteriorating influence in an institution for the insane require to be carefully and constantly prepared and brought into play, and states of passiveness and sluggishness counteracted by appeals to those mental faculties which remain unimpaired, and by the gentle and exhilarating influence of occupations, amusements, and cheerful society.” As examples of the means adopted, it is stated that “the town and surrounding country are visited for all kinds of purposes both on foot or in carriages. Some of the ladies took an interest in the late Ladies’ Sale on behalf of the Industrial Schools, and contributed to it articles of needlework. During the last autumn also a lady accompanied the Matron and an attendant on a visit to Balmoral for the purpose of seeing Her Majesty and the Royal Family. The interesting object was attained by visiting Crathie Church, where it was known Her Majesty attended regularly. The journey occupied three days, was performed by postchaise, and afforded an opportunity of visiting some of the choice spots of that part of the Highlands. The result of the excursion was most satisfactory and profitable. It acted as a tonic of the whole system, both mental and physical, and afforded matter for conversation, letter writing, and criticism for long afterwards.”

Another paragraph from this Report well deserves notice, namely, that in which the very clear and sound opinion is expressed on the question of the special treatment of so-called criminal lunatics in ordinary Asylums. That some patients are more troublesome than others, that some (as the suicidal and homicidal) are more dangerous than others, and that some are of so vicious and often obscene a strain that it becomes very doubtful whether, out of consideration for the other patients, they ought to be treated in the

same Institution, is of everyday experience ; but that the insane can be divided into criminal and non-criminal merely because the former may have inflicted serious or even fatal injuries, and often from not having been sufficiently looked after, must be regarded as very doubtful. Application had been made for the admission of a Dr Smith who had been tried for incendiarism and proven insane. The endeavours of his friends to secure this were defeated, not in consequence of any reluctance to comply with the request, but solely on account of the unusual obligation which the Judges of the High Court of Justiciary demanded from the Directors of the Asylum in regard to Dr Smith's safe custody. The Directors expressed their willingness to sanction his admission as an ordinary patient subject to the established laws of the Institution, and refused to depart in this instance from their ordinary practice as to the conditions for the reception of patients. This having been considered unsatisfactory by the Judges, his removal to the Asylum was not permitted. No scruples were entertained as to the propriety of giving Dr Smith the benefits of the Institution. It was enough that his insanity existed, and that the violent act was one of its symptoms, to entitle him to all the privileges and forbearance accorded to the deranged intellect. "It has never been," continued Dr Wingett, "the practice here to make the fact that an insane act had been committed the ground for refusing to afford protection and a retreat to the insane perpetrator. Such an individual is called in common parlance a 'criminal lunatic,' and a sentimental line of separation is drawn between him and ordinary lunatics. The true and only difference, however, consists in the fact that the insane who have done violent deeds have not been properly watched by their friends, whereas the insane whose hands are clean have received that care and protection from their friends which it was a paramount duty to bestow. If any criminality be imputed for an insane act, it is both reasonable and humane to cast it rather upon those who should have acted the part of guardians than upon the bereft sufferer, who has been hurried along by his irresistible and blind infatuation. This is precisely the spirit which presides over the treatment and government of the inmates of an Asylum. If a patient unhappily commits a violent act the blame is at once thrown upon his curator. The former is regarded with commiseration, the latter is visited with indignation. It would be absurd to apply the degrading epithet 'criminal lunatic' in such a case. It is equally indefensible to make any difference either in our language or feelings when considering insane acts committed *before*, and similar acts committed *after*, entrance into an Asylum. The morbid



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appetites and insensate impulses are identical in the two cases ; but in the one case the opportunity was presented, while it was withheld in the other—the precise difference consisting in what the guardians of the patient had done or omitted to do. The two words of the designation used obviously stand in direct contradiction to each other, seeing that *criminality* implies responsibility, and *lunacy* implies the absence of it. To foster or encourage this odious distinction is practically to treat disease as a crime, to punish misery and misfortune, and to commit as great an outrage against charity as when men held the ancient prejudice that the insane were removed from the pale of humanity by the special visitation of God.”

During the year ending 16th June 1856 the Directors again express regret at being unable to meet the demands for admission of patients, 36 having been admitted but 25 refused admission.

An important change also took place in the death of Dr Patrick Nimmo, who had for twenty years been the Attending and Consulting Physician to the Asylum, discharging the duties devolving upon him with zeal and ability. In connection with this office the bye-laws regarding the duties had remained unchanged since the beginning ; but after the appointment of a Resident Medical Superintendent, these duties having become neither so heavy nor so responsible, the Rules were altered to meet the altered circumstances of the Asylum, and instead of being required to visit at least three times a week, and at a salary of £100 per annum, it was resolved that his successor should be required to visit only once a week, and the salary be reduced to 50 guineas. Dr Robert Cocks was appointed Dr Nimmo's successor.

A reference in the Medical Report to the services of the attendants and servants deserves notice. In stating that they merit the highest commendation, it is added “that the only mode for inducing qualified individuals to undertake such harassing, disagreeable, and difficult duties, and to persevere in such offices, is for those in authority over them to do everything possible to promote their happiness and contentment, to encourage them to feel an attachment for their afflicted charges, and to induce them to understand that their position, although apparently lowly esteemed, is really one of high importance and responsibility.” As an illustration of the success which had attended the inculcation of these views, it is stated that “twelve of the servants at present in the Institution have held their situations for periods varying from the tenth to the seventeenth year, and it is a very gratifying and laudable fact, affording at the same time a trustworthy measure of

the efficiency and respectability of this humble but most useful class of public servants, that since the time that the last annual Report was presented not one of the twenty-nine individuals forming the entire corps of servants of the Institution had incurred either reprimand or penalty for any violation of the rule of sobriety, morality, and humanity which it is well understood must be scrupulously followed," although the system of management was such that any would at once have been detected.

During the year terminating 15th June 1857 what may not improperly be termed the intellectual treatment of the patients reached its maximum in the establishment of a Literary Society, which is thus referred to:—

"There is always an amount of healthy intellectual power and capacity among the patients which may be employed with benefit to the possessors and to their fellow-residents. There are individuals of literary and scientific tastes who can be provided with opportunities for usefulness by teaching classes and delivering lectures. In order to take advantage of these elements in our midst, a little Association has been incorporated and formally styled 'The Dundee Society for the Diffusion of Useful Knowledge.' This Society is composed of patients of both sexes, the officials of the Institution being also enrolled as members. One of the patients has been elected its chairman, who takes the nominal management of all the proceedings. A weekly lecture is delivered either by a patient or the Resident Medical Officer. Once a month the Society holds what it has resolved to denominate a scientific 'cookie shine.' Upon this latter occasion the members assemble in full dress if possible. A suite of rooms is prepared for the occasion. In one apartment coffee and cookies are served at the same time that a scientific demonstration is introduced, illustrated by experiments and diagrams. Upon the last occasion the subject chosen was the 'Electric Telegraph.' A miniature telegraph apparatus was prepared; wires were laid through the room, messages were transmitted, the laws of the galvanic current discussed, and the whole subject so copiously illustrated that the Society did not fail to obtain a clear comprehension of its intricacies and wonders. On a previous occasion the stereoscope was introduced and expatiated upon, and each member had an opportunity of examining a series of beautiful views.

"The coffee, cookies, and science having now been discussed, the Society is accustomed to pass to another apartment, which has been prepared for a ball. The musical members occupy the orchestra, some of whom are masters of the music of Scotland, and a

series of dances concludes the entertainment. A song has been composed by one of the members, who is also a patient, and has been appointed Poet Laureate of the Association. It is usually sung in chorus at some part of the evening, and being entitled 'Our Cookie Shine,' it has been adopted as a kind of character of incorporation by the members. It may be deemed interesting to repeat its opening verse which runs thus :—

'Come let us join wi' heart and mind
Sweet friendship's board to grace,
For daftness o' the social kind
Is never oot o' place.
 'Oh, some get fou wi' barley bree,
 And some get fou wi' wine,
 But we'll get fou wi' friendship's glee,
 And haud our Cookie Shine !'

"The Society also established a museum for natural objects of interest and scientific apparatus.

"Among the subjects treated of in these lectures were, 'The Influence of Mental Fatigue upon Health,' 'The Genius of Burns,' 'The Character of Wesley's Hymns,' 'The Philosophy of St Paul,' 'The Probable Fate of Sir John Franklin,' 'A Criticism of Queen Elizabeth's Behaviour towards Queen Mary,' 'Will the Comet Strike the Earth?' etc. Upon each occasion the ordinary formalities incident to other societies are observed. The Chairman occupies a conspicuous and elevated seat, and opens the proceedings by a few remarks introducing the lecturer and his subject. At the close of the lecture the Chairman pays a compliment to the author, and presents the thanks of the meeting, the whole proceeding occupying little more than an hour."

In view of the erection of Pauper District Asylums under the New Lunacy Act for Scotland the question of the advantage or disadvantage of having the rich and poor, or private and pauper patients, under one roof and in the same Institution was freely discussed. It will be interesting to quote the opinion then entertained on this subject :—"The opinion," says the Medical Report for this year, "prevails in some quarters that the residence of patients of the upper and lower classes in the same Asylum is objectionable, and that separate establishments should be provided for their accommodation. This opinion is grounded upon the supposition that the rich and refined must experience a certain degree of repugnance at the idea of the proximity of their lowly and less favoured fellows. The experience of this Institution has afforded abundant and ever present evidence of the groundlessness of this notion. No such feelings are ever manifested by the upper

classes. They uniformly regard such incorporation of different ranks of individuals in precisely the same spirit with which they have been accustomed to regard it in the community which they have left. They perceive the same classes of society within as there are without. The distinctions of rank are, however, preserved; separation as regards residence is effected; and the pursuits and privileges of all have their appropriate limits assigned to them. No association or mingling takes place other than that which is desired by each individual or which may be prompted by the ordinary motives which bring rich and poor into contact in everyday life. Benevolence and sympathy bring about a certain amount of voluntary communication among the different grades highly conducive to the health and happiness of all. It is matter of certainty that this juxtaposition of classes had a great deal of influence in augmenting the general prosperity. It is of daily occurrence that a variety of patronage is exercised by the rich to the advantage of the poor. Here as elsewhere rank adopts its pensioners and proteges; cast-off dresses and remainders of dainties are given away, and the diffusion of these little benefits among the poor affords both occupation and gratification to the donors. In fact the establishment is regarded by all in the light of a small parish. One church unites all grades or worshippers, and a common affliction tends to inspire a feeling of condescension and friendly attachment rather than impatience on account of the poor being tolerated as neighbours. Judging from the experience of this Institution it is certain that the upper class insane would repudiate this feeling which has been attributed to them, and regard the isolation of their poorer fellows with deep regret. The juxtaposition of classes has always been a pleasant feature in the constitution of this Asylum, and fruitful in means of promoting harmony and contentment. The poorer classes are, however, the greatest gainers by this arrangement, seeing that they are thus the recipients of courtesies and kindness, having nothing but gratitude and respect to give in return. I have long been convinced," continues Dr Wingett, "that this is the best and most effective plan upon which a public Asylum can be organised; and in the prospect of extended accommodation for the insane of Scotland, I sincerely trust that the benefits realised by this Institution with its admirable system of incorporation of Classes will not be lost sight of out of preference for any cold and inexperienced proposals to improve upon existing arrangements by separating patients into distant and unsympathising groups of rich and poor."

The debt of the Institution having been reduced to £3629, the Directors at last considered they were justified in considering the

extension of the buildings to meet the continued demand for accommodation. The last addition had been made in 1839, consisting of the S.E. or female block, and had cost £3000. The accumulated savings for the past eight years had been £5160. They had accordingly asked Dr Wingett to submit a report on the whole subject, which was laid before the meeting. This Report recommended that additional apartments should be provided for 50 female patients, the accommodation to consist of 2 dayrooms, 12 single bedrooms, 4 dormitories, with bathroom, lavatories, etc. This would be the completion of the female side very much in accordance with the original plan and as had already been done on the male side, with the addition of a large dayroom 30 feet by 28 feet and 15 feet high. It was also suggested that a dayroom, bathroom, etc., should be added to the male side; that more land should be obtained, a range of workshops erected, and a bakehouse provided. It was specially pointed out that a dayroom, a sickroom, and another bathroom for the female pauper patients constituted the most pressing wants, but it was also added, "not only are the demands from without urgent, but there are many wants relating to the internal organisation and comfort which are of importance." Notwithstanding the fact that so many patients, even from Dundee and the immediate neighbourhood, had been yearly refused admission, it was resolved to proceed with the erection of the dayroom, sickroom, and bathroom only. The policy of restricting the number of patients to the present available accommodation, which had so long ruled the management of the Institution, instead of boldly extending the buildings to meet the increasing demand, was persisted in, and the natural result of such a policy was very soon manifested in the position and financial state of the Institution.

It was accordingly recorded in the Report submitted to the Annual Court, in June 1858, that this, "it is believed, will meet the necessities of the case for a good while to come." The outlay on the dayroom, etc., was to be £614. But another subject had engaged the attention of the Directors, namely, the possible operation of the new Lunacy Bill, "introduced by the Lord-Advocate for the better provision for Lunatics, and the better regulation of Lunatic Asylums in Scotland." It was considered that this Bill, if passed as originally proposed, "seemed likely to interfere with the local management of the Institution." Correspondence was accordingly carried on with other Institutions, especially that in Montrose, and the co-operation of Sir John Ogilvy, member for the burgh, sought and readily granted. The

Treasurer was instructed to proceed to London, had an interview with the Lord-Advocate, and suggested the alterations the Committee deemed desirable. In this they had the co-operation of other Chartered Asylums, especially of Glasgow, with the result "that the provisions of the Bill were considerably modified, and ultimately the county of Forfar, which already makes ample provision for its own lunatic paupers, was separated from the Statutory District to which it would naturally have belonged under the Bill, and now," the Report adds, "that the Bill has passed into law, the entire effect which it has on your Asylum is simply to subject it to the inspection of the Commissioners who are appointed for this purpose in Scotland"—Lunacy Act, 1857.

But it may be well to consider the position of the Institution at this time, as it was afterwards found out that the new Lunacy Act was destined to have a far greater influence on its welfare than was originally supposed.

The Bill as originally drafted purposed to give considerable power over all Asylums, Clause 9 providing that "the [General Lunacy] Board over and above the powers hereby specially committed to them shall have the superintendence, management, direction, and regulation of all matters arising under this Act in relation to lunatics and to Public, Private, and District Asylums, and it shall be lawful for the Board from time to time to make and establish such rules and regulations as they may deem necessary towards the good order and management of all Private and District Asylums," etc. These powers were, however, restricted by the rider secured by the co-operation of the existing Chartered Asylums and appended to this clause, viz., "Provided also that nothing in this Act contained, unless where otherwise specially provided, shall be construed to extend to any Public [*i.e.*, Chartered] Asylum existing or in course of erection at the passing of this Act, further than to enable the Board to authorise and regulate the inspection and visitation of such Asylums and to make and enforce such rules and regulations as they shall think necessary in relation to the books or minutes to be kept or made, and the returns of the entries therefrom to be made to the Board by the persons having the management and care of such Asylums," 20 and 21 Vict., Cap. 71, Clause 9.

Again the whole of Scotland under this Act was originally divided into eight districts—(1) The Edinburgh district, comprising the counties of Edinburgh, Haddington, Berwick, Linlithgow, Roxburgh, Selkirk, Peebles, and Orkney; (2) the Inverness district, comprising Sutherland, Ross and Cromarty, Inverness, Elgin, and

Nairn; (3) the Aberdeen district, comprising the counties of Caithness, Banff, Aberdeen, Kincardine, and Shetland; (4) the Perth district, comprising the counties of Forfar, Fife, Perth, Clackmannan, and Kinross; (5) the Dumfries district, comprising the counties of Dumfries, Kirkcudbright, and Wigton; (6) the Glasgow district, consisting of Lanarkshire; (7) the Stirling district, comprising the counties of Argyle, Bute, Dumbarton, and Stirling; (8) the Renfrew district, comprising the counties of Renfrew and Ayr. But from the very first it was seen that this division would be a very unwieldy one, and as the Statute contained provisions for splitting these districts up into smaller ones, these were taken advantage of and the actual arrangement adopted was very much a division into counties, with a few exceptions where several very small counties, such as Dumfries, Kirkcudbright, and Wigton, were retained as one district. The ultimate number of districts was twenty-one, the original Perthshire district being divided into (*a*) the Forfarshire district, (*b*) the Perthshire district, and (*c*) the Fifeshire district, including the counties of Fife and Kinross. Clackmannanshire was attached to the Stirling district. On 1st January 1858, in regard to the Forfarshire district the Commissioners report that it was chargeable "with 355 pauper lunatics, of whom 171 were males and 184 females. Of these 132 males and 143 females were in Public Asylums, 5 males and 8 females in licensed houses, and 4 males and 4 females in Poorhouses. Altogether 141 males and 155 females were in Asylums and Poorhouses, and 30 males and 29 females in private houses as single patients. The existing accommodation consists of the Asylums of Dundee and Montrose. The former house contains accommodation for 166 pauper patients and private patients at pauper rates, viz., for 96 males and 70 females, and deducting 10 as the average number of private insane at pauper rates sent in from the district, there will remain accommodation for 156 pauper lunatics." —First Annual Report of Commissioners of Lunacy for Scotland, p. 18.

The accommodation in Montrose Asylum was estimated at 320, and it was considered that there was accommodation for 121 patients beyond what was required. This available accommodation was still farther increased by the retention of the old Asylum at Montrose for the reception of patients, so that in their second Report (page 16) the Commissioners stated that "including the two Asylums at Montrose and at Dundee, there is now accommodation within the Forfarshire district for 606 pauper lunatics, the number chargeable to the district on 1st January 1859 being only 369.

There is consequently an excess of accommodation for 237 patients, principally due to the opening of the new Asylum at Montrose." But while the accommodation for pauper patients and private cases at pauper rates in the Dundee Asylum was thus estimated by the Commissioners in Lunacy at 166, viz., 96 males and 70 females, the Institution for years, if not over-crowded, had been so full that many patients, even from the surrounding district, had been refused admission, and on the 15th June 1857 the patients remaining in the Asylum (including private cases at all rates, and of whom there were about 50), was 122 males and 96 females, or 218 in all.

Such was the position of affairs when, and very probably as a consequence, an important step was taken by the Dundee Parochial Board, namely, an application by that Board to the General Board of Lunacy for a license "to place their own lunatic paupers in the Poorhouse, which had been lately erected." A notice of this was duly received by the Directors from the General Lunacy Board, with a request to know the provision which was made for that class of patients in the Dundee Asylum, and the terms on which they were received. As the practical solution to this question, as effected by the Commissioners of Lunacy in 1864, exercised what may be not incorrectly designated a prolonged, baneful, and injurious influence on the prosperity of the Institution, it will be necessary to consider it somewhat at length. When first made it was refused by the General Lunacy Board on the grounds that there was an excess of accommodation in the district. In their first Report it is stated, page 19:—"It was in consideration of this excess that we considered it our duty to refuse an application by the Parochial Board of Dundee to license part of their Poorhouse for the reception of fatuous cases. The preamble of the Act 21 and 22 Vic., Cap. 89, states, as the reason for conferring on us the power to license poorhouses, that it is expedient that provision should be made for the custody of pauper lunatics till the district Asylums are ready for their reception, and there being already sufficient accommodation within the district, we held that we were thereby debarred from exercising the powers entrusted to us." The opinion on this subject entertained by the Asylum authorities is so well expressed by Dr Wingett in his Report that no excuse need be offered for reproducing it somewhat at length. "I have been asked," he writes, "whether there are not many patients in the Asylum who are harmless to themselves and others, who are incapable of being cured, and who might not be more economically and conveniently maintained and managed in a Poorhouse than in a regularly organised Lunatic Asylum. My opinion is that no

insane patient, who is not helpless from bodily infirmity or total loss of mind, can be said to be harmless to himself or others. This expression can be used with propriety only as a relative term, meaning that the patient in question is not so dangerous as others are, or that he is not known to be refractory or suicidal. The great majority of violent actions perpetrated by insane persons have been committed by those unfortunate individuals who had previously been considered harmless. The explanation is that those suspected of harbouring dangerous intentions are usually watched and protected in such a manner as to check the indulgence of their propensities, whilst the so-called harmless lunatic or idiot has often been left without the care which all lunatics require, until some mental change has taken place or some unusual source of irritation has been experienced, causing a sudden and lamentable event. In an Asylum, such patients may truly be described as not dangerous to themselves or others, because they are constantly seen by individuals experienced in observing the first symptoms of mental change or excitement, and in allaying them by proper remedies.

“In the management of the insane, the broad statement must be made that the choice lies between a system which cares merely for their detention and sustenance, and the contrary one, whose primary object is the humane and enlightened care, treatment, and well-being of the patients.

“Wherever the insane are lodged their care and maintenance as a class is inevitably expensive, and not justly to be compared with the cost which, under the stringent and necessary economy of a Poorhouse, is found to be sufficient to maintain a pauper not insane; and the voice of experience, in this matter, will tell that this cost is not to be avoided by deprivation of liberal care and treatment.

“In considering the cost of patients in public Asylums, it will be noticed that some patients cost the Asylum double as much as others, and that the charge made for care and maintenance must of course be averaged upon those whose actual cost is much greater and those whose actual cost is much less than the mean. Consequently it would be unfair and unreasonable for any Parochial Board to say, of any single patient, that he could be maintained for a smaller sum than that charged, when the probability is that there are or have been patients in the Asylum from the same parish whose actual cost to the Asylum has been much greater than that charged to the parish. The actual cost of an individual patient, if all things are taken into consideration, is often very far above the average. The fact should be attentively looked at, that, if all

the industrious and useful patients were to be removed from the Asylum, the inevitable result must be that the average cost of those who remained would be augmented, so that the pecuniary result to the Parochial Board would be much the same. For instance, there are patients under our care who cost the Institution about twelve shillings a week, at the same moment that we are receiving from the Parochial Boards only eight shillings. Leaving out of consideration the welfare of the patients, it would be obviously unfair and unreasonable that a parish having four patients in the Asylum, the actual cost of two of whom was twelve shillings a week, and the cost of the other two was only four shillings a week, should be allowed to remove the two who cost the smaller sum and be permitted to leave the other two at the average charge of eight shillings a week." And yet as will be afterwards seen this is what practically took place.

Another matter of importance at this time engrossed a good deal of the time and attention of the Directors, namely, their relations to the new District Lunacy Board for Forfarshire. When the Lunacy Act was passed it was hoped, through the efforts made by the existing Asylums Directors while the Bill was passing through Parliament, to conserve intact the management of these Institutions. They had been successful, and the interference of the General Lunacy Board would be limited merely to inspection, keeping of records, and calling for returns of entries therefrom. It happened, however, that a correspondence with the District Lunacy Board for Forfarshire formed a very prominent part of the employment of the committee during the year. A good deal of this was no doubt necessary in connection with the removal of pauper patients belonging to other counties, and the transference of the same class belonging to this county from other Asylums. This was only to be expected and was cordially agreed to. "When, however, the Board proceeded to specify the rate at which, and the parishes from which, such patients should be received," says the Annual Report, "your committee thought proper to question their right to do so, and it remains for this meeting to say how far such demands should be complied with in future. In the meantime your committee have succeeded in maintaining their own rate of charge for this class of patients; but they are expressly informed that the concession extends only to the 31st day of December next." To understand the action here taken by the Directors it is necessary to refer to the clause in the Lunacy Act regulating the reception of pauper patients into Chartered Asylums, viz., 20 and 21 Vic., Cap. 71, Clause 59. This clause provides that "in case there shall be any

Asylum establishment in any district which shall have sufficient accommodation for the reception of the pauper lunatics of such district, or can be easily rendered adequate to the reception of such pauper lunatics, or any portion of them, the District Board of such district shall before proceeding to assess for or erect any District Asylum, contract with the proprietors or parties interested in any such Asylum for the use of the whole or any part of the same, or for the reception and maintenance of the pauper lunatics of such district or any portion of them, upon such terms as shall be arranged between the District Board and such proprietors or parties interested; and in case of difference between the District Board and proprietors or parties interested relative thereto, such difference shall be subject to the decision of the Board; and where any such agreement shall be completed with a Public Asylum the portion of such Asylum which shall, in terms thereof, be appropriated to the reception of such pauper lunatics, shall be and remain under the care and management of the proprietors or parties interested therein, subject to the power of inspection and visitation, and power of making regulations hereinbefore conferred upon the Board."

With regard to this clause two views might reasonably be entertained. Firstly, that action on the part of the District Lunacy Board was only called for when it was found necessary to "assess for or erect a District Asylum," and that, as in the case of Forfarshire, where ample Asylum accommodation already existed, no action was required, but that the Asylums should continue to arrange directly with the Parochial Boards without the intervention of the District Lunacy Board; and this view received considerable support from subsequent legislation (25 and 26 Vic., Cap. 54, Clause 12), where it is provided that, "if in any District there shall be no District Asylum, it shall be lawful for the District Board of such District, with the sanction of the Board, to dissolve itself, and on the requisition and order of the Board such District Board may again at any time be revived." And secondly, that wherever there existed pauper lunatics the District Board for the District was bound either in the first place to contract with the proprietors of existing Asylums or assess for and erect an Asylum for the District. That the former view influenced the Asylum Directors seems pretty clear, seeing the delay that took place in completing any contracts, but the latter interpretation was that adopted by the *General Lunacy Board and was insisted on*, which resulted for many years afterwards in considerable friction, and ultimately practically killed the Dundee Royal Asylum.

The history of the Asylum now enters on a new era and under altered conditions in consequence of the passing of the Lunacy Act, 1857. It was now inspected for the first time by Government officials, the Lunacy Commissioners.

The following is the Report made by Dr James Cox on the occasion of his first visit, 27th and 28th May 1858 :—

“ May 27 and 28, 1858.

“ Visited the Royal Dundee Asylum. The House contained at the former date 219 patients, of whom 122 were males and 97 females. No patient was under restraint or seclusion, and there is no entry of restraint in the corresponding register. Under the head of ‘ Seclusion ’ occasional entries occur, generally at intervals of several days, and the period is usually for a few hours. It is seldom that two patients are in seclusion at the same time. Three patients are recorded as suffering from bodily ailments, but none were confined to bed from this cause ; the sanitary condition of the House is thus most satisfactory. Only one death has occurred since the 1st of January. Of the males 71 are employed and 51 unemployed, and of the females the proportion is 54 to 43. The principal means of employment are gardening, weaving, tailoring, and the work of the House on the male side ; and washing, ironing, sewing, and weaving on the female side. The proportion of unemployed appears high, and it is suggested that with more varied means of occupation it might be considerably diminished.

“ The chief sources of recreation consist in reading, music, picnics, walks to the country, weekly lectures, and monthly entertainments ; and there is a daily school attended by about 20 patients, who read, write, cipher, etc. About 60 males and 46 females attend Divine service in the chapel which has recently been erected. It stands detached from the Asylum, an arrangement which appears to give pleasure to the patients, and to exercise a salutary effect upon them.

“ The House was remarkably clean, and free from offensive smells. The wet patients generally use the old-fashioned trough beds with straw mattresses, but the utmost care is taken to purify the bedsteads, and the straw and sacking were in every instance clean and fresh. On the male side a night watch raises a certain number of these cases at three different periods, and this practice is found to operate beneficially. The clothing and bedding of the patients were ample, and in good condition ; and their physical health shows not only that their diet is good and judicious, but that the care bestowed upon them in every way must be very great. If any criticism were made where there is so much to be commended it would be to the

effect that the House is overcrowded, which leads perhaps to there being a larger number of destructive cases than there would be were the sources of excitement more diffused. A remedy to a certain extent is being provided on the female side by the erection of a new day-room, which will very much tend to diminish excitement.

"All the patients were seen, and the authority on which they were admitted examined. It was found that no warrant or order by the Sheriff exists for thirteen of the early admissions, and it is recommended that orders be now obtained. The statutory registers were examined, and found to be kept with much neatness and great accuracy.

"(Signed) JAMES COXE,
"Commissioner in Lunacy."

The first patient admitted since the new Lunacy Act came into operation was an imbecile who made his exit from the Poorhouse of a neighbouring parish. He had often wandered away before, and had become well known to the children of the district. Children never fail immediately to perceive and to be interested in mental deficiency and eccentricity, and with characteristic recklessness they saluted him with the sobriquet of "Daft Jamie," a title which had the effect of rousing him into a rage, and impelling him to inflict violent punishment upon his tormentors. Upon the occasion of his last escape from his pauper residence he accosted a gentleman and peremptorily demanded money from him. The police authorities apprehended him, kept him for a few hours, and then returned him to his former guardians. The Inspector of Poor after this very judiciously made the customary arrangements for placing him in the Asylum. The simple proceedings thus taken in disposing of this difficulty reflected much credit upon all concerned for the discretion and judgment displayed, and is a precedent worthy of being followed in all parallel cases.

About this time, February 1859, Dr Wingett, the Medical Superintendent, had the misfortune to be thrown from his horse, by which accident his arm was both broken and dislocated, which caused a long and painful illness. It was necessary under the circumstances to obtain an assistant. At first the services of Dr Wingett's brother, also a medical man, were obtained for the Asylum, and under his care its interests were very efficiently attended to; but in July 1859 a permanent appointment was made, Dr James Rorie commencing his long connection with the Institution on that date. He was a native of Arbroath, and a young

Edinburgh graduate who had taken his degree with the highest honours that the University could give.

Dr T. T. Wingett died the following April. He for 10 years had acted as Medical Superintendent, and discharged the duties with great tact, intelligence, and ability. The loss the Asylum now sustained is thus referred to in the Directors' Report for the year :—

“The affairs of the Asylum are very much in the same state as when last Report was laid before you. There is only one exception to this remark, and that is the removal by death of your esteemed Medical Superintendent, Dr Wingett. About a year and a half ago he met with an accident, which seems to have materially affected his general health ; and though he was able for a while to attend to his duties as usual, he ultimately found it necessary to seek relief from them, and died at Broughty Ferry in April last in the prime and vigour of his days. The Directors deplore the loss of his valuable services, and they cannot but regard it as one of the best evidences of his ability and fidelity that no particular difficulty has arisen in the internal management of the House notwithstanding his decease. He was chosen to the office which he held, in June 1849, and has all along devoted himself with exemplary diligence to the discharge of his important duties. Modest and unassuming in his deportment, his abilities were little known except to those who had the best opportunity of being acquainted with them. His Reports submitted to you from year to year were always singularly interesting, and showed the thorough knowledge which he possessed of mental disease and of the best methods of treating it. The accuracy also and neatness of the various records he had to keep indicated the orderliness which characterised all his movements—a quality of great importance to one in his position. His widow, who has long and ably filled the office of Matron in the Asylum, still continues to do so, and has been enabled to apply her mind to her duties notwithstanding her affliction. During Dr Wingett's illness the services of a well-recommended assistant were obtained, and Dr James Rorie, who had made this department of Medical Science his particular study, has been living in the House since July last, and giving entire satisfaction to the Directors. During the greater part of that time he has had the entire charge.”

On 18th June 1860 Dr Rorie was unanimously appointed Medical Superintendent.

In the Medical Report Dr Rorie thus refers to Dr Wingett's death :—“In connection with the proceedings of the Institution one event alone now remains to be noticed, but that one the most

important, and at the same time the most melancholy we have to record. I need scarcely say that I here refer to the loss we have sustained in the death of Dr Wingett, who for eleven years held so successfully the office of Superintendent in this Asylum. Uniting to a strong and vigorous mind a strictly unblemished moral character and great courtesy of manner, he appeared pre-eminently fitted for the situation he so worthily occupied. His kindness and attention to the patients were only surpassed by his knowledge of their infirmities and his skill in their treatment; yet, while his whole energy and attention were devoted to one object—the comfort and happiness of the inmates and the prosperity of the House—he yet occasionally found leisure, as many of his writings testify, to communicate to the world some of that experience and knowledge the possession of which was one of the leading features of his character.

“From an early period of his career he devoted himself almost exclusively to the study of Psychology, and availed himself of all opportunities afforded him both at home and abroad of acquiring a thorough knowledge of his profession. The first pupil of mental diseases educated in Scotland, he was well qualified for the situation he held, while the success and prosperity of the Asylum during his administration sufficiently indicate that the confidence reposed in him by the Directors was not misplaced. In the death of Dr Wingett the insane have lost a benefactor, this Asylum an able Superintendent, and many a one a valued friend.”

This practically completes the history of the first fifty years of the Dundee Royal Asylum as written by Dr Rorie, who, for the greater part of the next half century, acted as Superintendent.

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